

# 2019 National Survey on Drug Use and Health: Asian/Native Hawaiians and Other Pacific Islanders (NHOPH)

Substance Abuse and Mental Health Services Administration  
U.S. Department of Health and Human Services



***SAMHSA***  
Substance Abuse and Mental Health  
Services Administration

# National Survey on Drug Use and Health (NSDUH)

- NSDUH is a comprehensive household interview survey of substance use, substance use disorders, mental health, and the receipt of treatment services for these disorders in the United States.
- NSDUH is collected face-to-face by field interviewers who read less sensitive questions to respondents and transition respondents to audio computer assisted self-interviewing for sensitive items.
- NSDUH covers the civilian, noninstitutionalized population, aged 12 or older:
  - Includes: Households, college dorms, homeless in shelters, civilians on military bases
  - Excludes: Active military, long-term hospital residents, prison populations, homeless not in shelters
- Sample includes all 50 states and DC
- Approximately 67,500 persons are interviewed annually
- Data collected from January to December

# How Do We Use NSDUH?

- Provides a window into the state of substance use and mental health issues in the United States
- Helps to guide policy directions in addressing:
  - problem substances
  - prevalence of mental illness
  - intersection of substance use and mental health issues
  - provides insights that can be studied in the context of data from other agencies to help in decision-making about what types of resources are needed and where resources should be directed

# Mental Illness and Substance Use Disorders in America among Asian/NHOPI Adults ( $\geq 18$ y.o.)

PAST YEAR, 2019 NSDUH, Asian/NHOPI 18+

Among Asian/NHOPIs with a substance use disorder:  
1 IN 7 (14.2% or 106K) struggled with illicit drugs and alcohol

Among Asian/NHOPIs with a mental illness:  
1 IN 5 (21.3% or 482K) had a serious mental illness

**4.8%**  
**(745,000)**  
People aged 18 or older had a substance use disorder (SUD)

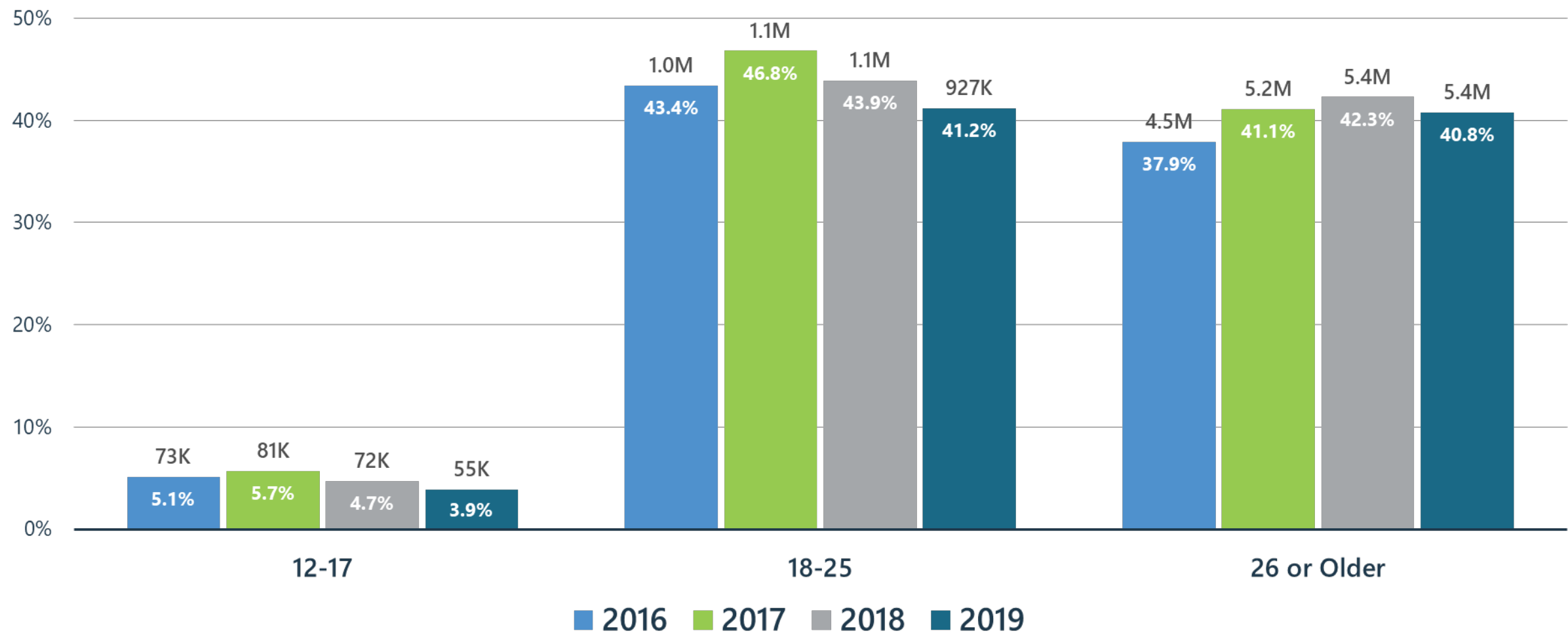
**2.1%**  
**(325,000)**  
People 18 or older had BOTH an SUD and a mental illness

**14.5%**  
**(2.3 MILLION)**  
People aged 18 or older had a mental illness

In 2019, **2.7M** Asian/NHOPI adults had a mental illness and/or substance use disorder.

# Alcohol Use among Asian/NHOPIs

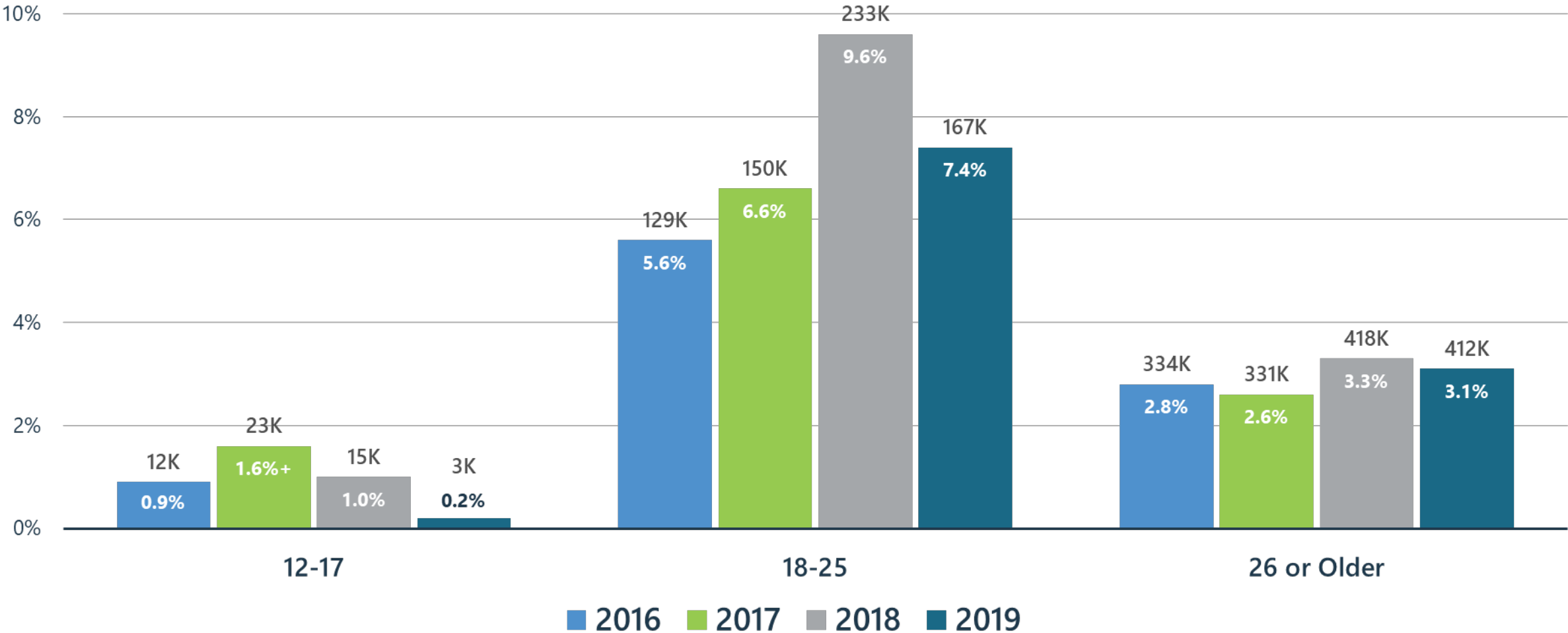
PAST MONTH, 2016-2019 NSDUH, Asian/NHOPI 12+



No differences between prior year estimates and the 2019 estimates are statistically significant at the .05 level.

# Alcohol Use Disorder among Asian/NHOPIs

PAST YEAR, 2016-2019 NSDUH, Asian/NHOPI 12+



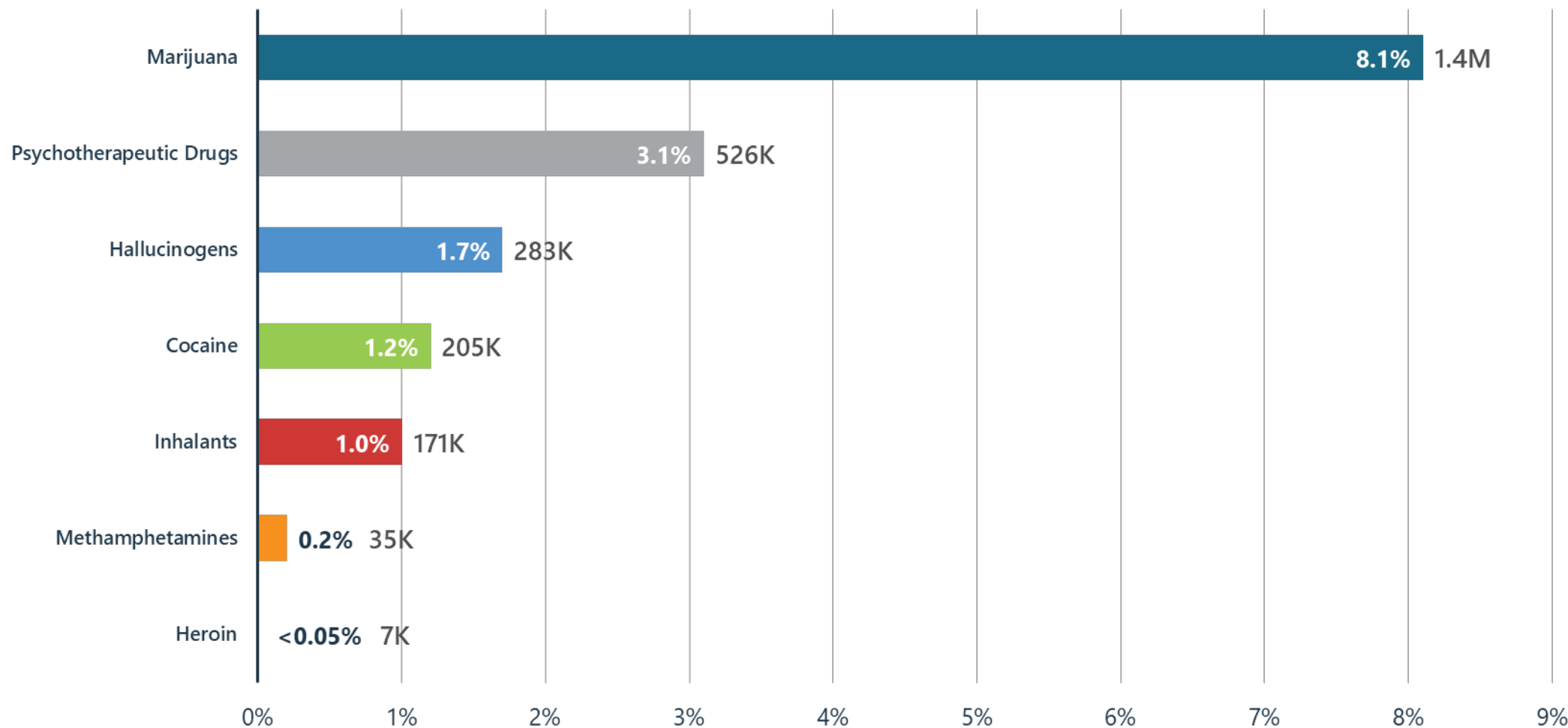
+ Difference between this estimate and the 2019 estimate is statistically significant at the .05 level.

# Summary: Alcohol Use in 2019

- Past month alcohol use remained stable in all age groups for the Asian/NHOPI populations during 2018-2019
- Alcohol use disorder significantly declined for Asian/NHOPI populations ages 12-17 from 2017 to 2019.
- SAMHSA will continue its prevention programs:
  - SAMHSA Prevention Technology Transfer Centers produce resources and materials related to alcohol misuse prevention
  - CSAP 'Talk They Hear You' focuses on underage drinking
  - CSAP requires Partnerships for Success grantees to emphasize underage drinking prevention
  - CSAT has promoted SBIRT for alcohol use in all programs including CJ, PPW, adolescent treatment, HIV and homeless programs
  - CSAT has funded SBIRT training in medical residencies and other healthcare practitioner programs which screen for hazardous alcohol use and use disorders

# Illicit Drug Use among Asian/NHOPIs: Major Concerns: Opioids, Marijuana, Methamphetamines

PAST YEAR, 2019 NSDUH, Asian/NHOPI 12+

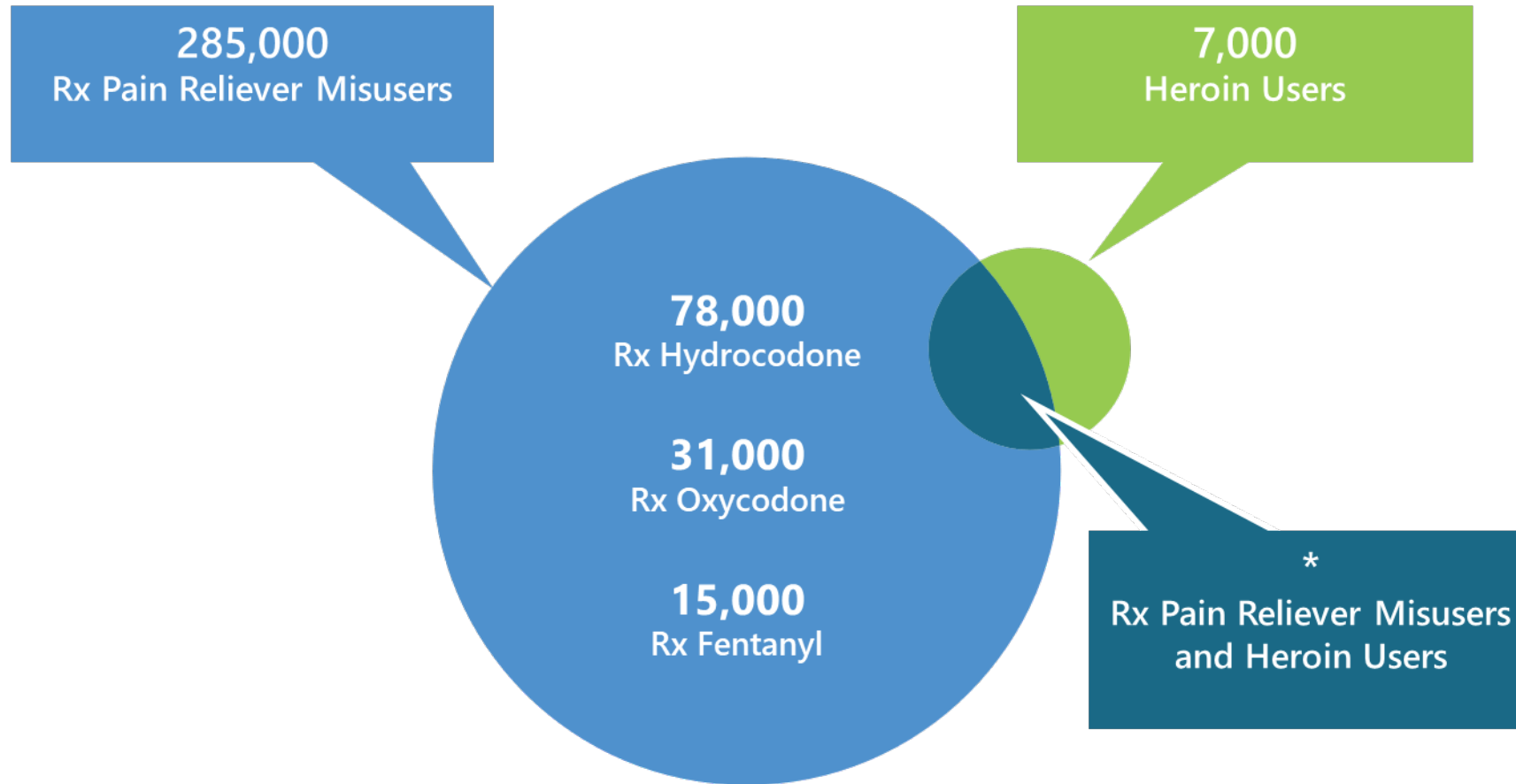




# Progress on the Opioid Epidemic: Prescription Pain Reliever Misuse among Asian/NHOPIs

PAST YEAR, 2019 NSDUH, Asian/NHOPI 12+

**292,000 ASIAN/NHOPI WITH OPIOID MISUSE (1.7% OF TOTAL POPULATION)**



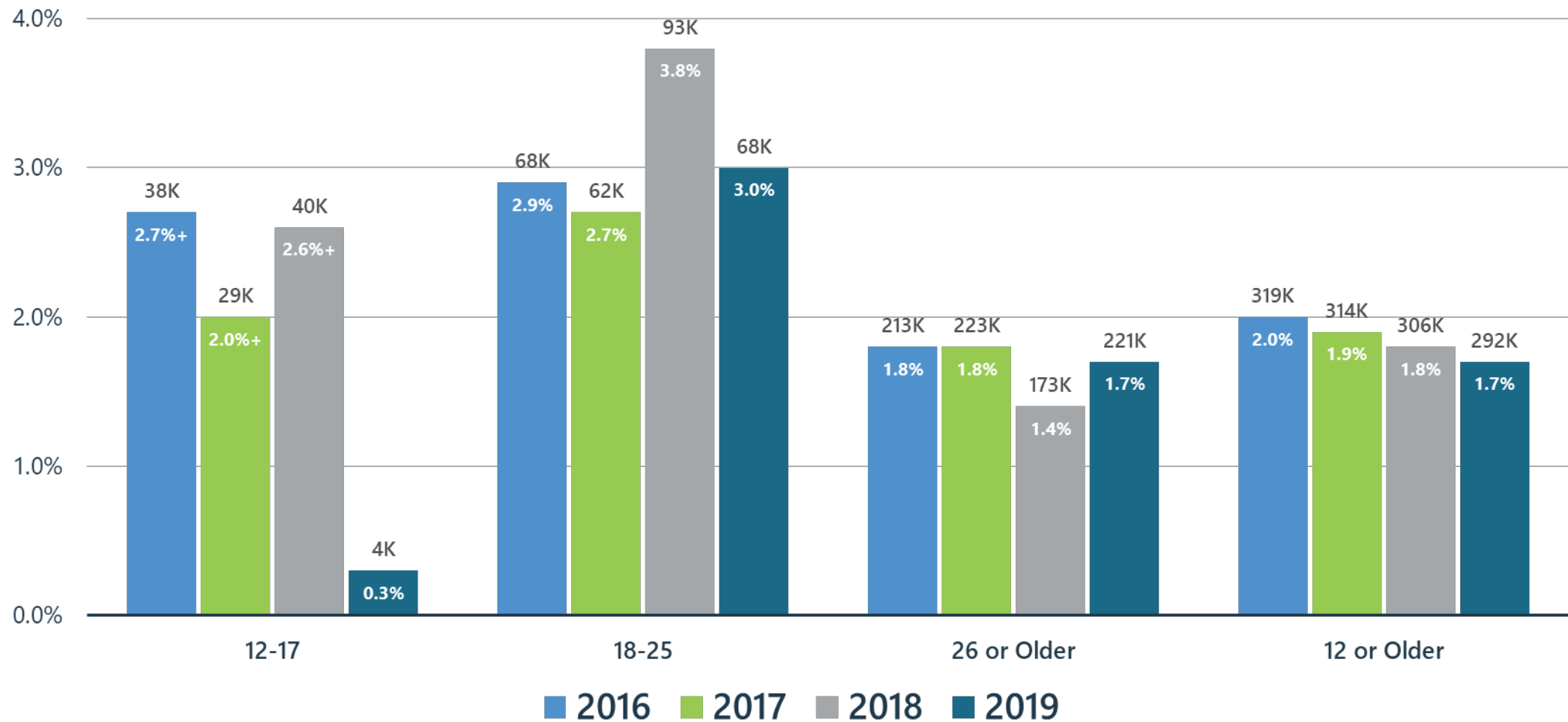
\* Estimate not shown due to low precision.

Rx = prescription.

Opioid misuse is defined as heroin use or prescription pain reliever misuse.

# Opioid Misuse among Asian/NHOPIs

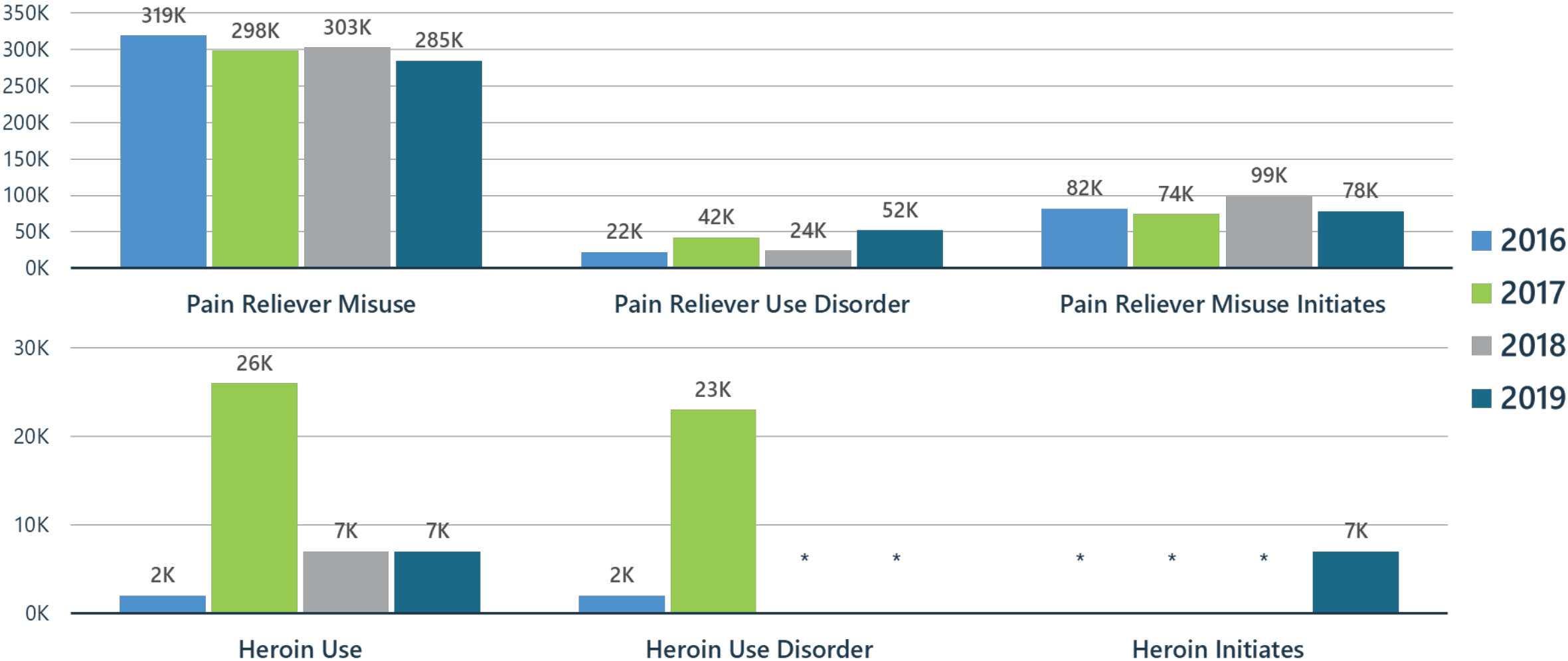
PAST YEAR, 2016-2019 NSDUH, Asian/NHOPI 12+



+ Difference between this estimate and the 2019 estimate is statistically significant at the .05 level.

# Prescription Pain Reliever Misuse and Heroin Use among Asian/NHOPIs

PAST YEAR, 2016-2019 NSDUH, Asian/NHOPI 12+

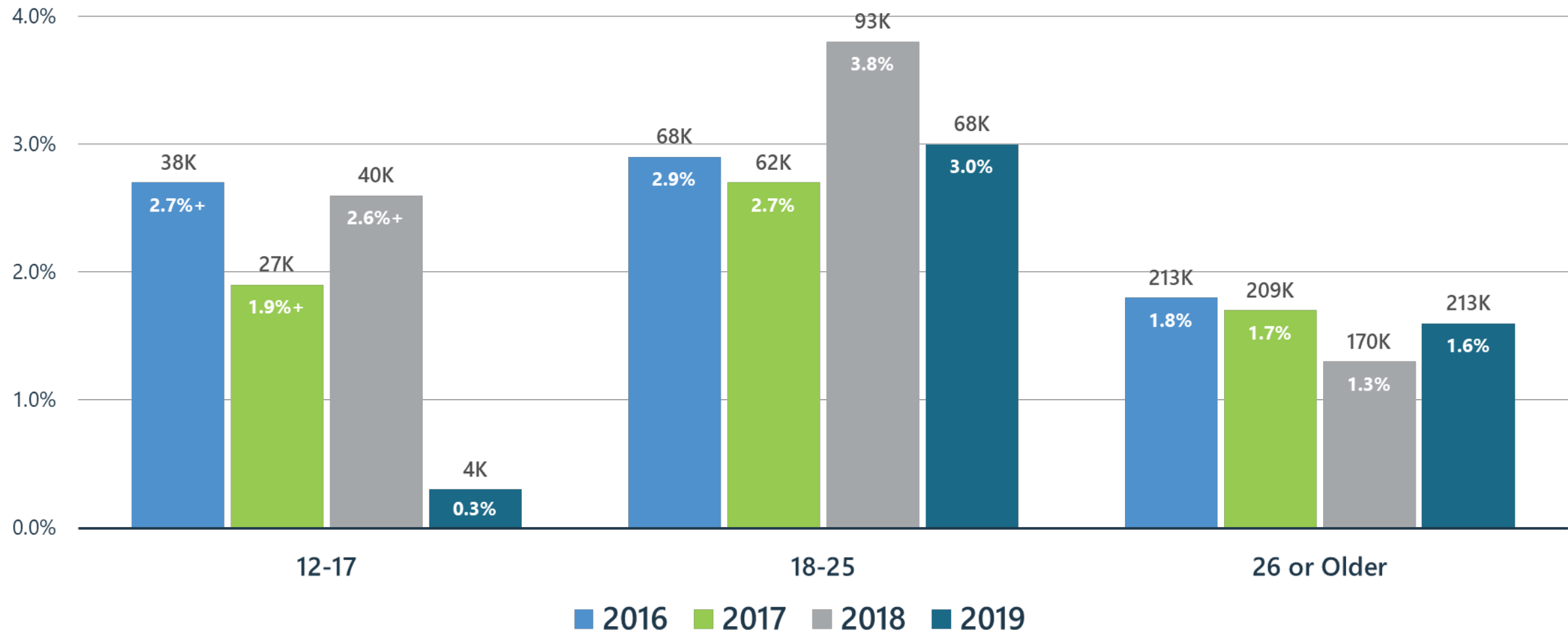


\* Estimate not shown due to low precision.

No differences between prior year estimates and the 2019 estimates are statistically significant at the .05 level.

# Prescription Pain Reliever Misuse among Asian/NHOPIs

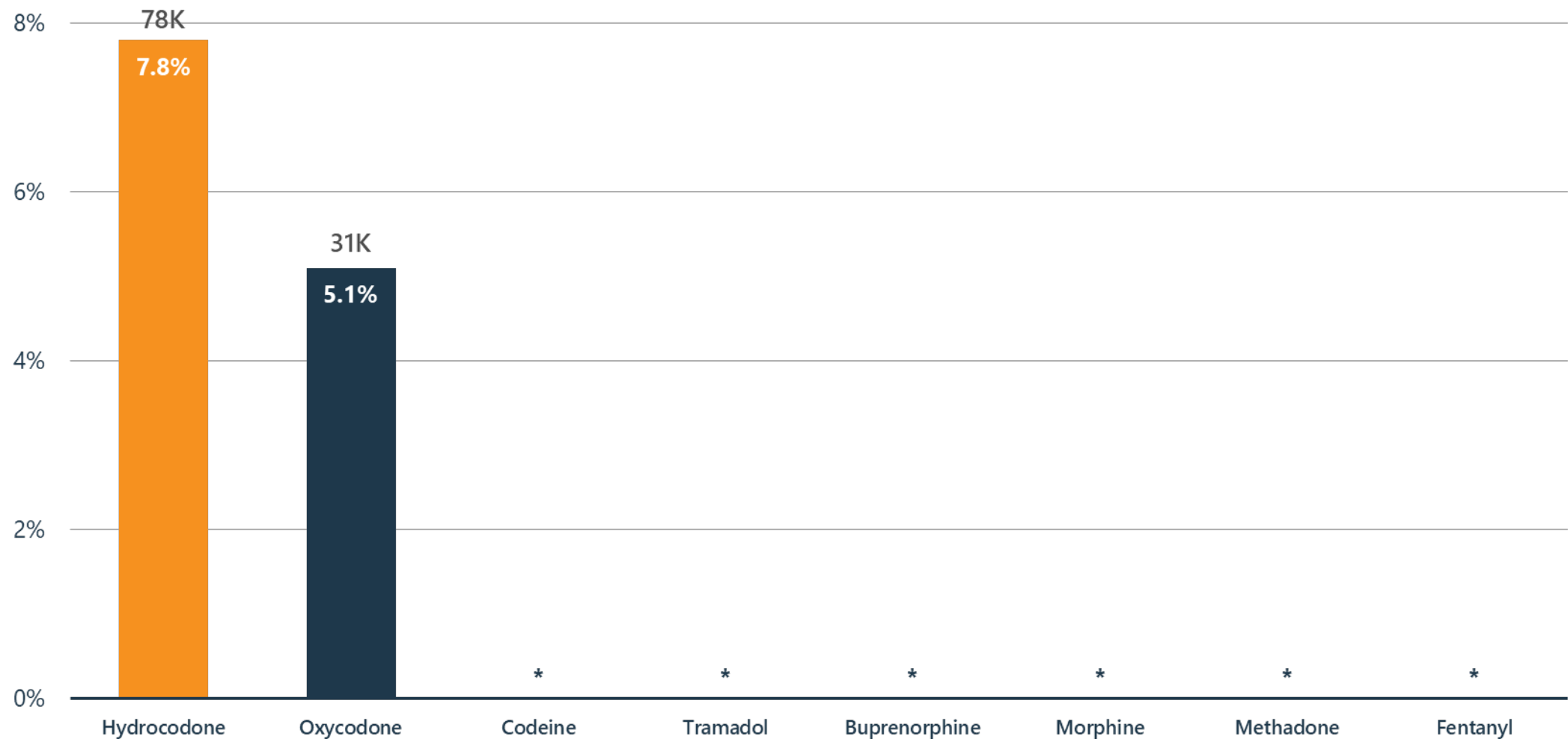
PAST YEAR, 2016-2019 NSDUH, Asian/NHOPI 12+



+ Difference between this estimate and the 2019 estimate is statistically significant at the .05 level.

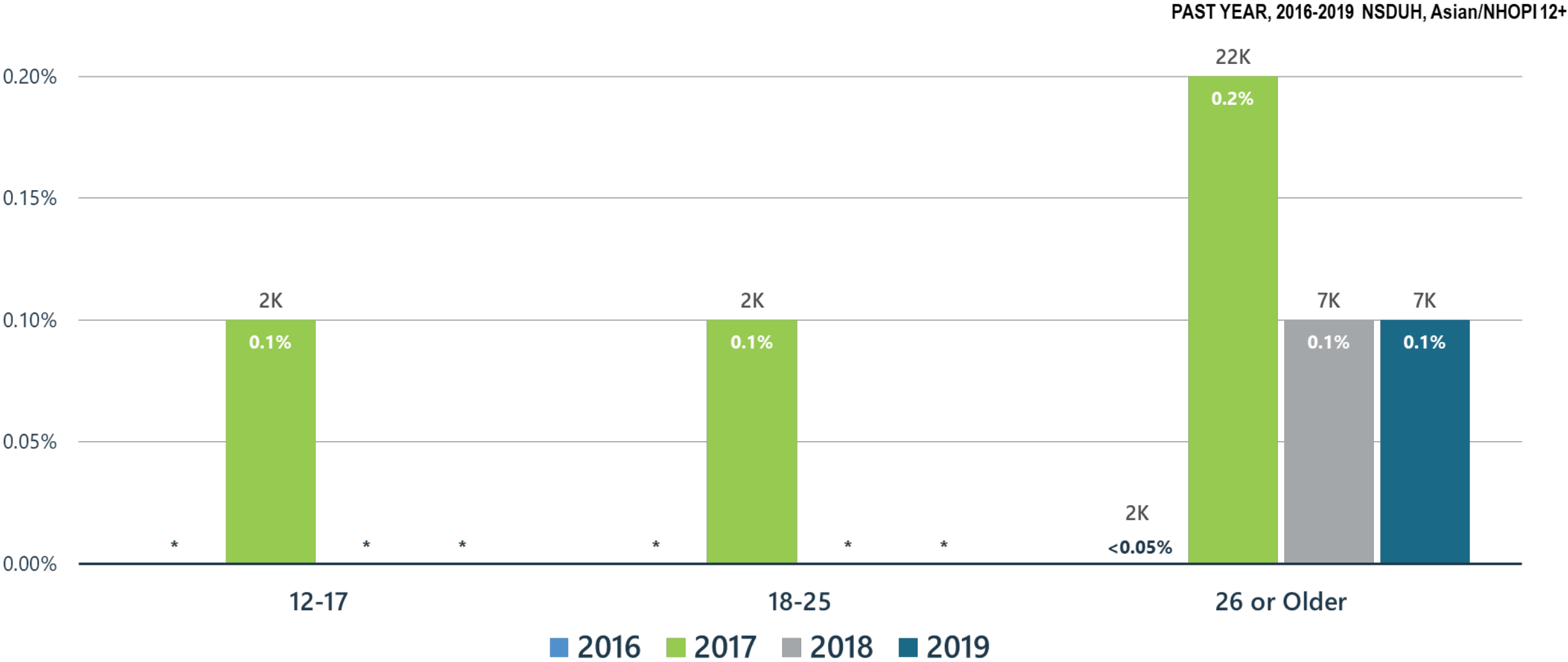
# Misuse of Prescription Opioid Subtypes among Asian/NHOPIs

PAST YEAR, 2019 NSDUH, Asian/NHOPI 12+ SUBTYPE USERS



\* Estimate not shown due to low precision.

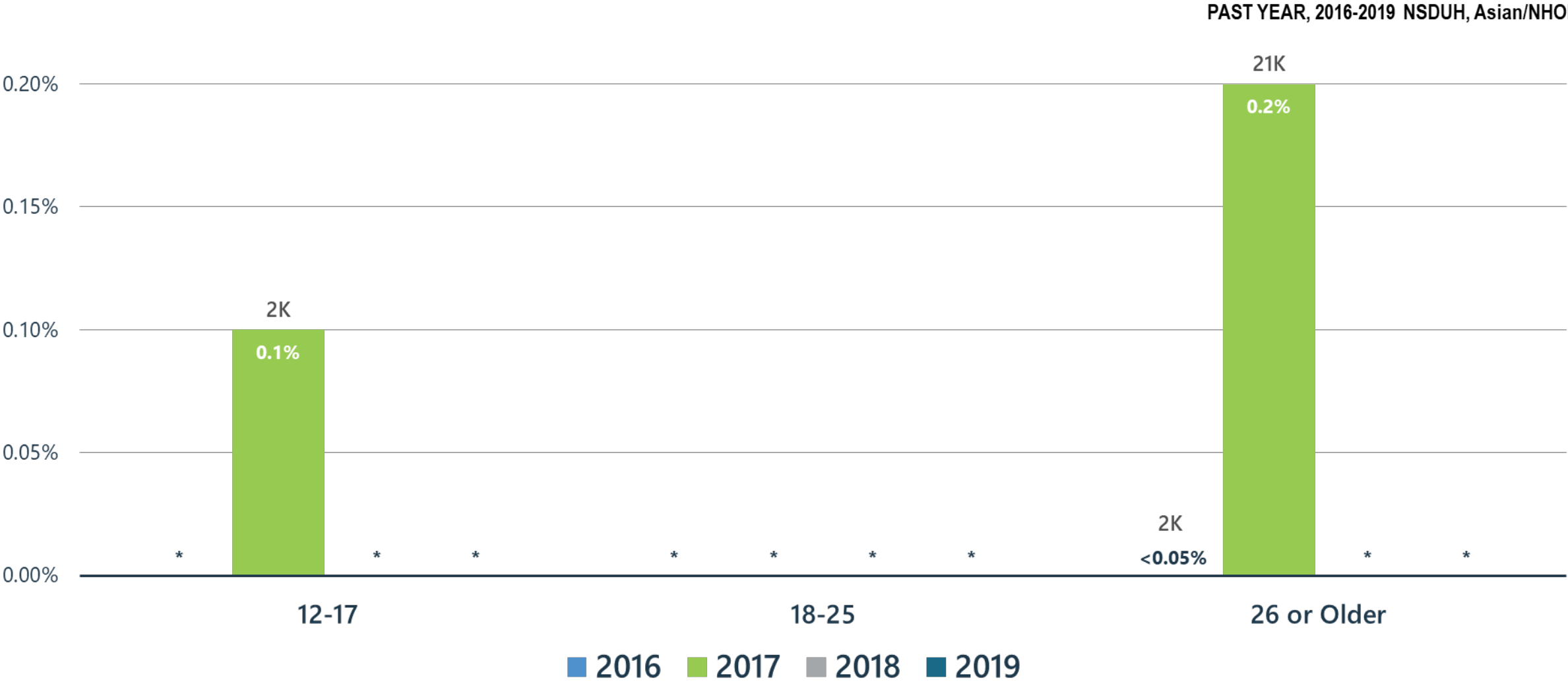
# Heroin Use among Asian/NHOPIs



\* Estimate not shown due to low precision.

No differences between prior year estimates and the 2019 estimates are statistically significant at the .05 level.

# Heroin-Related Opioid Use Disorder among Asian/NHOPIs

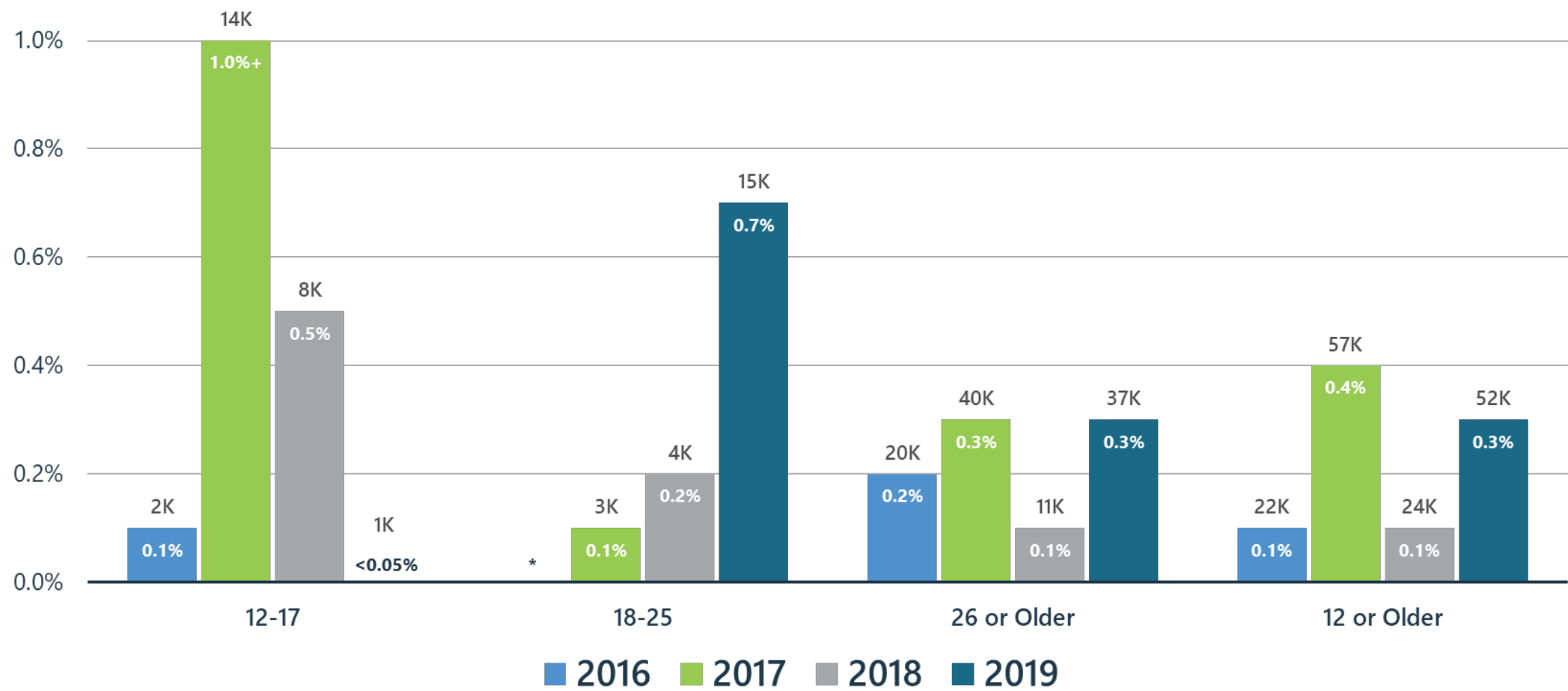


\* Estimate not shown due to low precision.

No differences between prior year estimates and the 2019 estimates are statistically significant at the .05 level.

# Opioid Use Disorder among Asian/NHOPIs

PAST YEAR, 2016-2019, Asian/NHOPI 12+

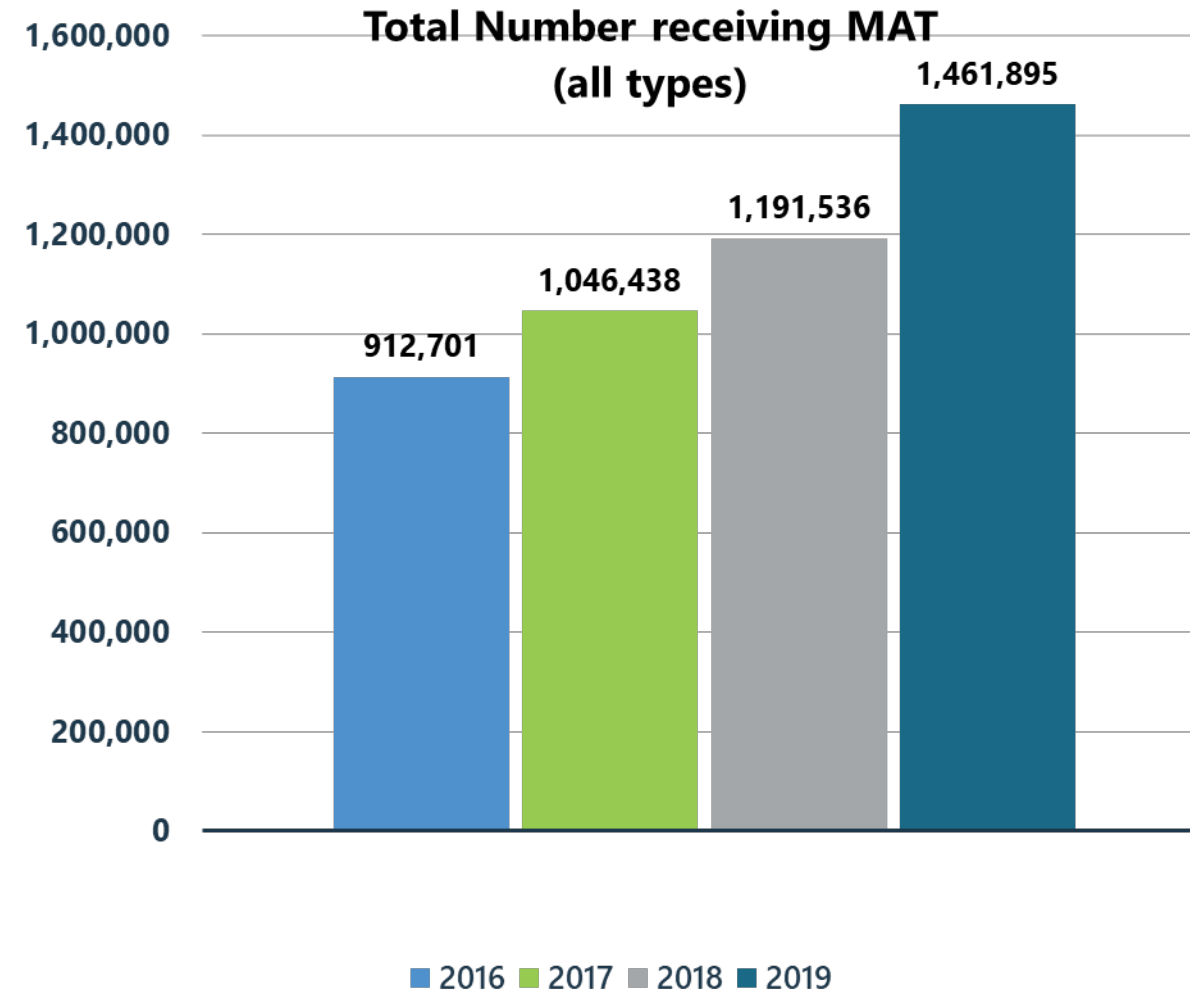
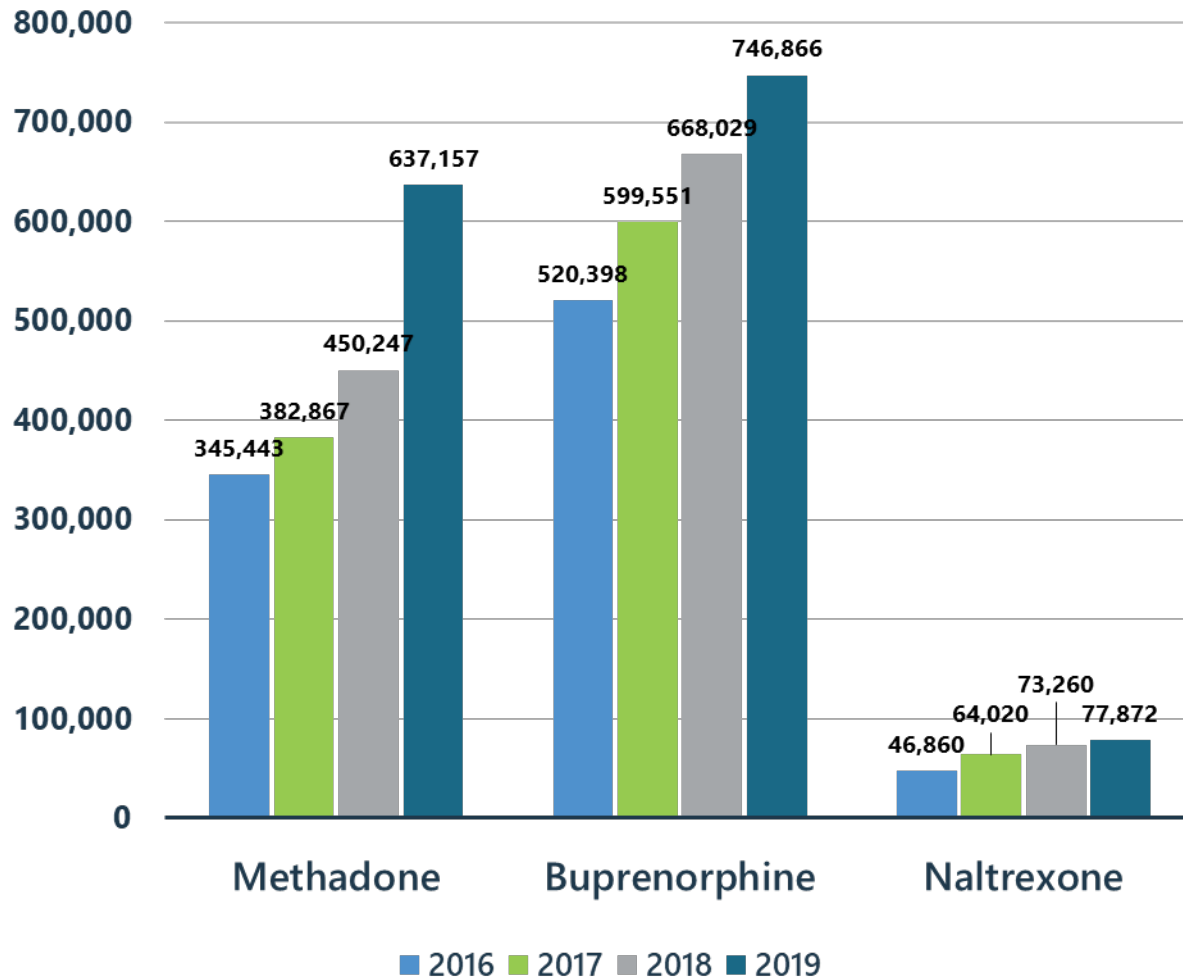


\* Estimate not shown due to low precision.

+ Difference between this estimate and the 2019 estimate is statistically significant at the .05 level.



# Treatment Gains: Number of Individuals Receiving Pharmacotherapy for Opioid Use Disorder (MAT)



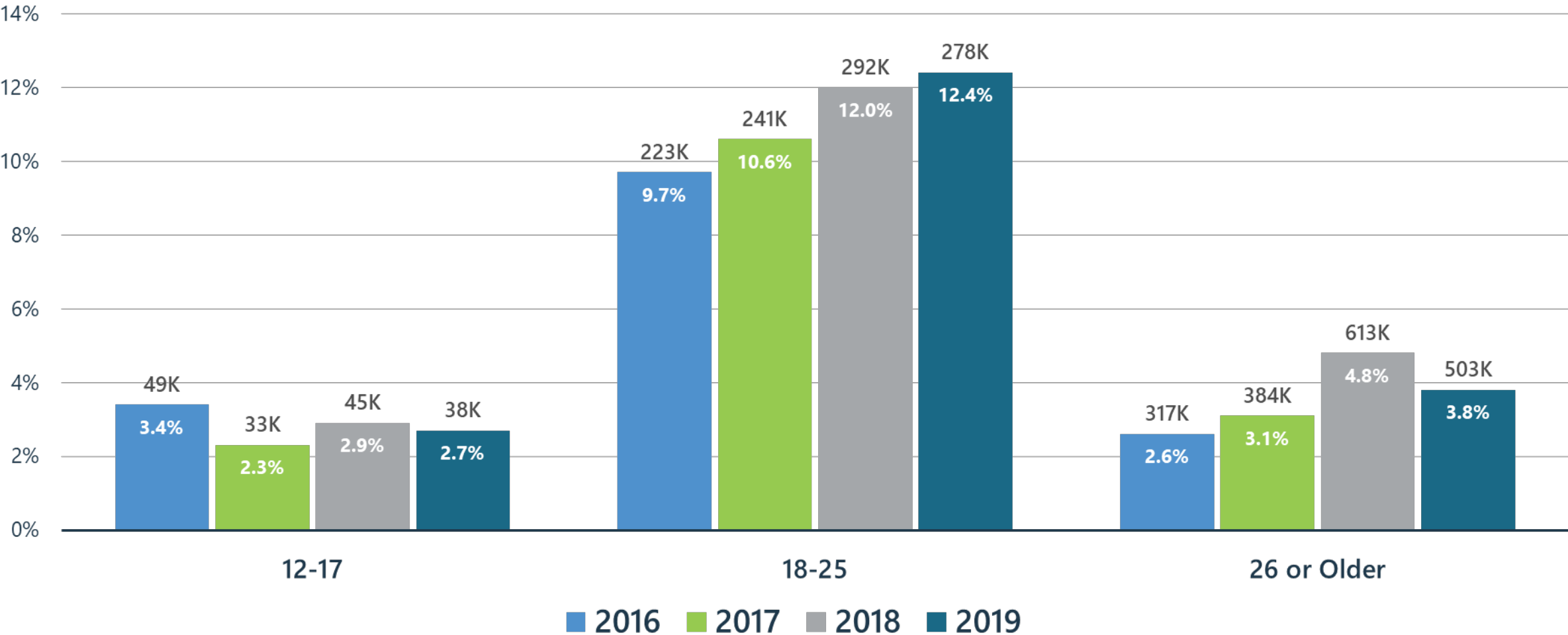
# Summary: Opioid Misuse in the United States in 2019

- Opioid misuse and prescription pain reliever misuse among Asian/NHOPI populations ages 12-17 significantly declined since 2018.
- Opioid use disorder for ages 12-17 has significantly declined compared to 2017.
- Access to medication-assisted treatment is increasing.

# Other Illicit Substances

# Past Month Marijuana Use for All Age Groups among Asian/NHOPIs

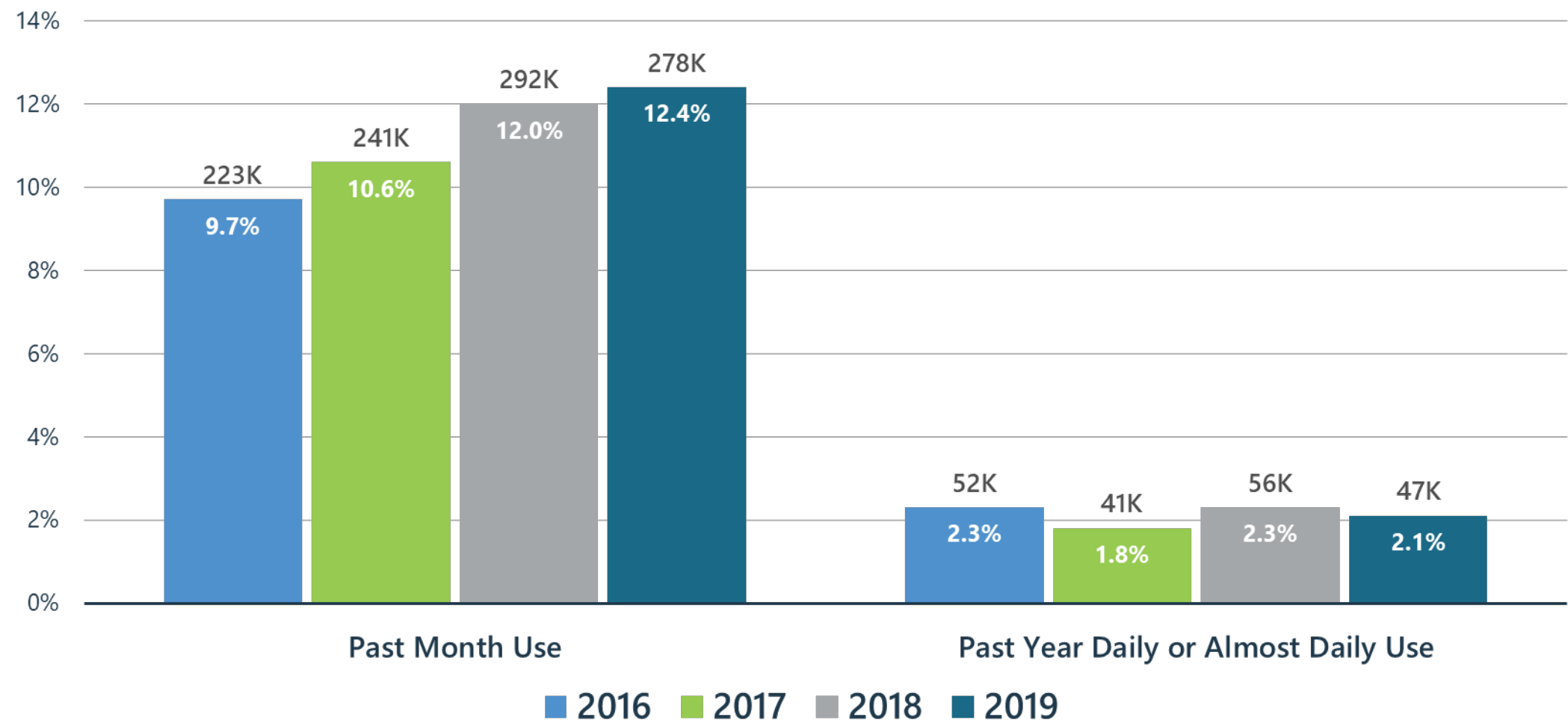
PAST MONTH, 2016-2019 NSDUH, Asian/NHOPI 12+



No differences between prior year estimates and the 2019 estimates are statistically significant at the .05 level.

# Marijuana Use among Asian/NHOPI Young Adults (18-25 y.o.)

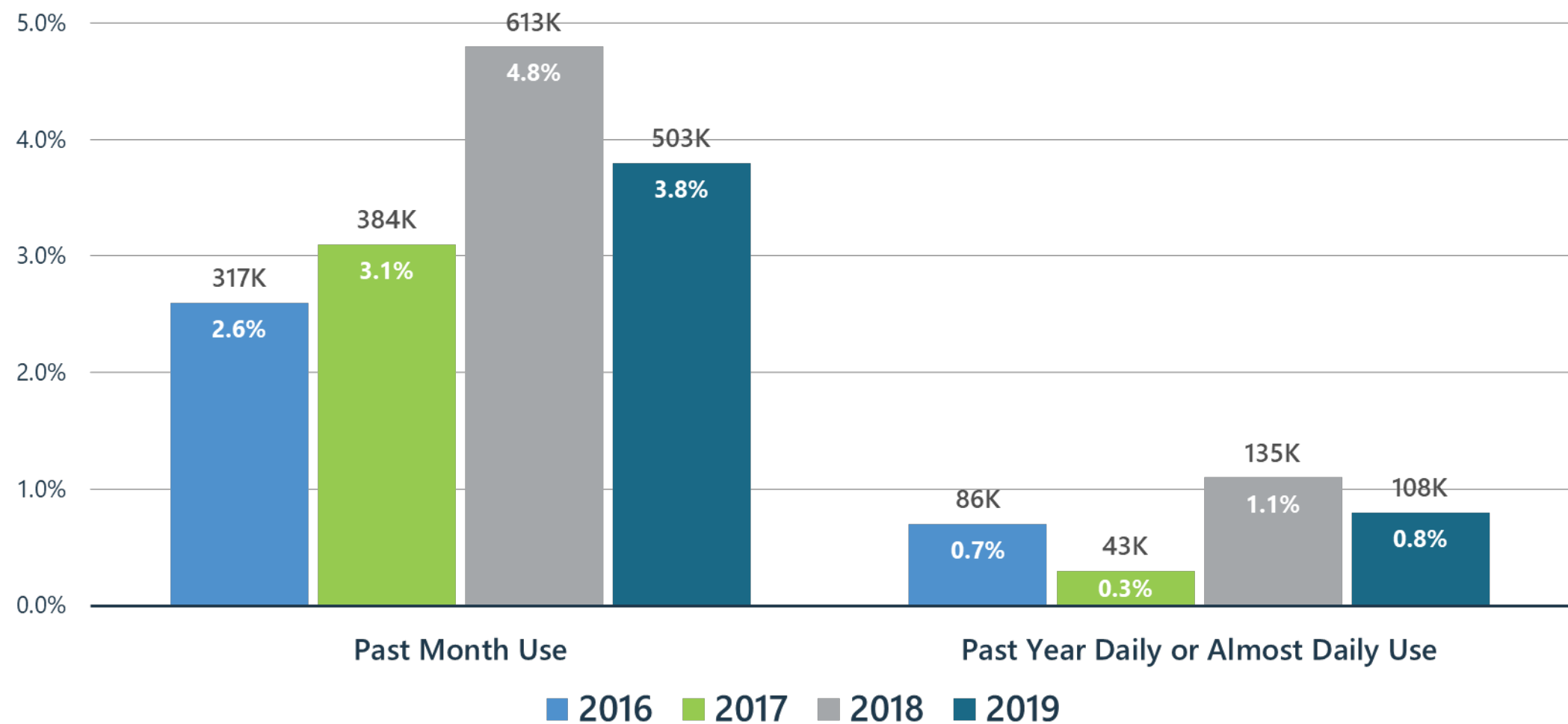
PAST MONTH/YEAR, 2016-2019 NSDUH, Asian/NHOPI 18-25



No differences between prior year estimates and the 2019 estimates are statistically significant at the .05 level.

# Marijuana Use among Asian/NHOPI Adults 26+

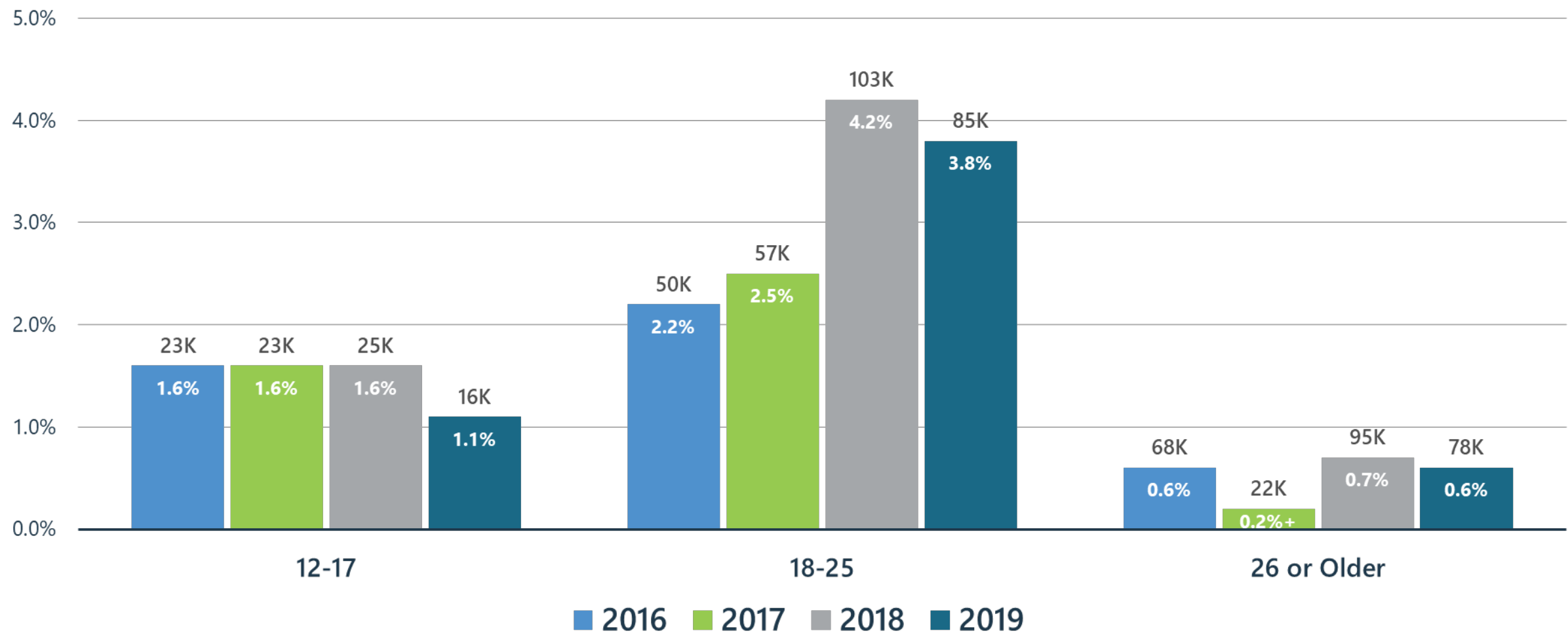
PAST MONTH/YEAR, 2016-2019 NSDUH, Asian/NHOPI 26+



No differences between prior year estimates and the 2019 estimates are statistically significant at the .05 level.

# Marijuana Use Disorder among Asian/NHOPIs

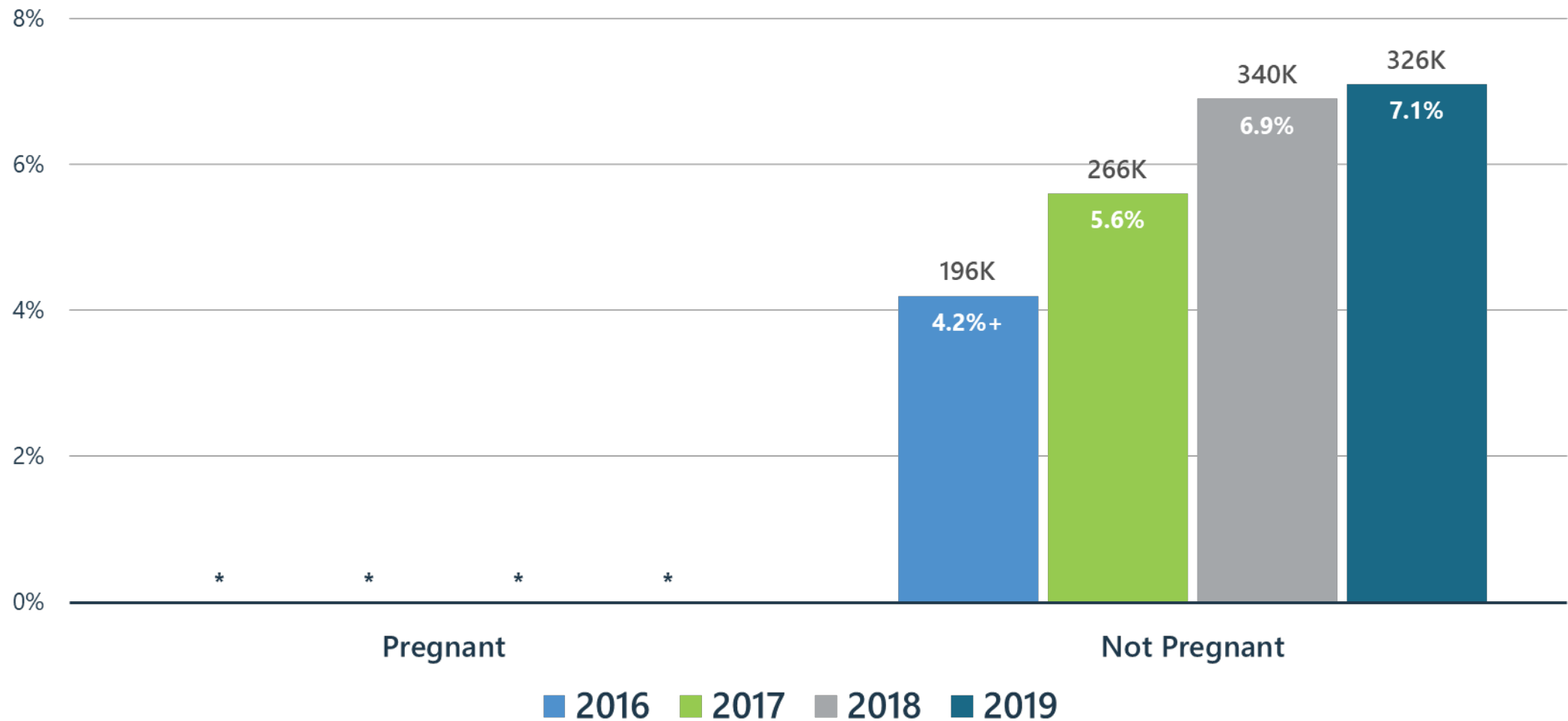
PAST YEAR, 2016-2019 NSDUH, Asian/NHOPI 12+



+ Difference between this estimate and the 2019 estimate is statistically significant at the .05 level.

# Marijuana Use among Asian/NHOPI Women by Pregnancy Status

PAST MONTH, 2016-2019 NSDUH, Asian/NHOPI 15-44



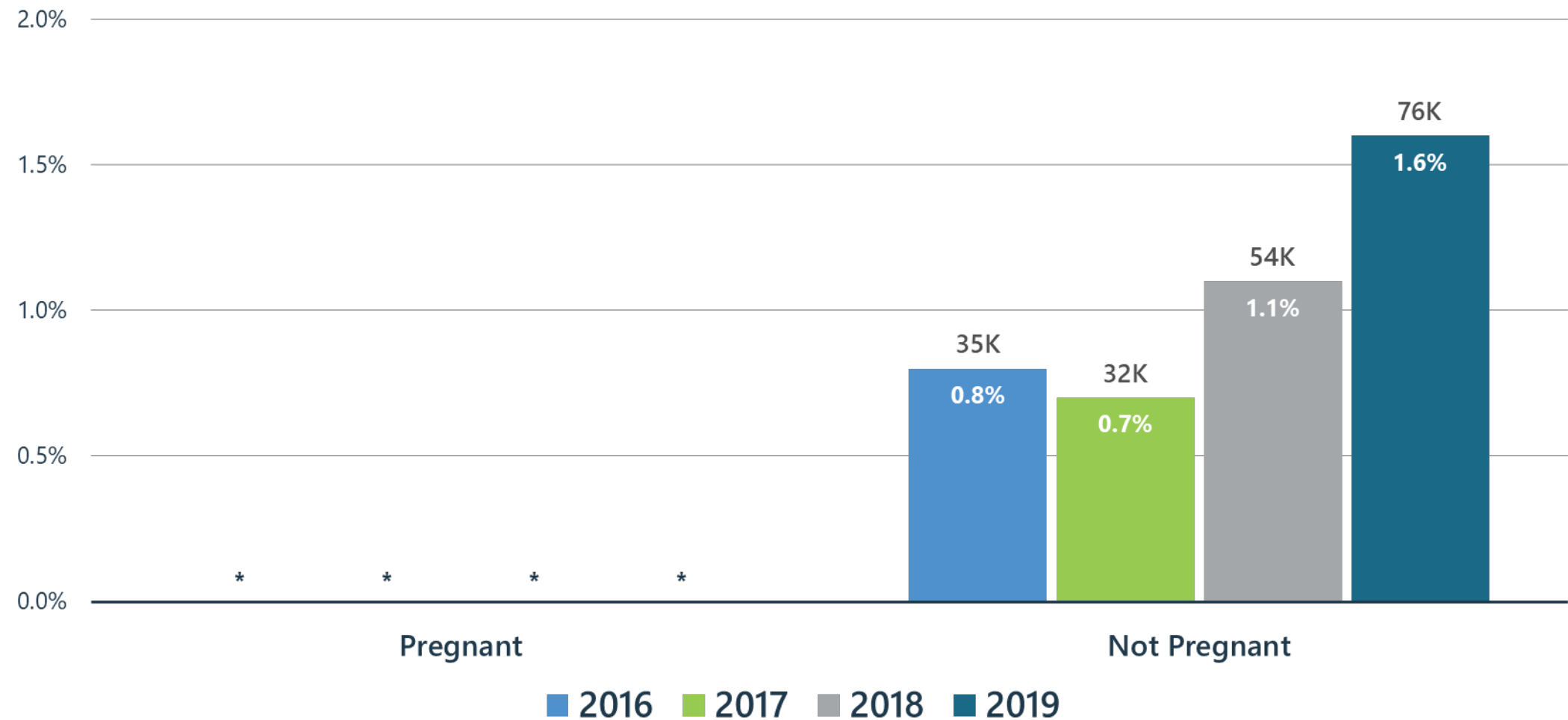
\* Estimate not shown due to low precision.

+ Difference between this estimate and the 2019 estimate is statistically significant at the .05 level.



# Daily or Almost Daily Marijuana Use among Asian/NHOPI Women by Pregnancy Status

PAST YEAR, 2016-2019 NSDUH, Asian/NHOPI 15-44



\* Estimate not shown due to low precision.

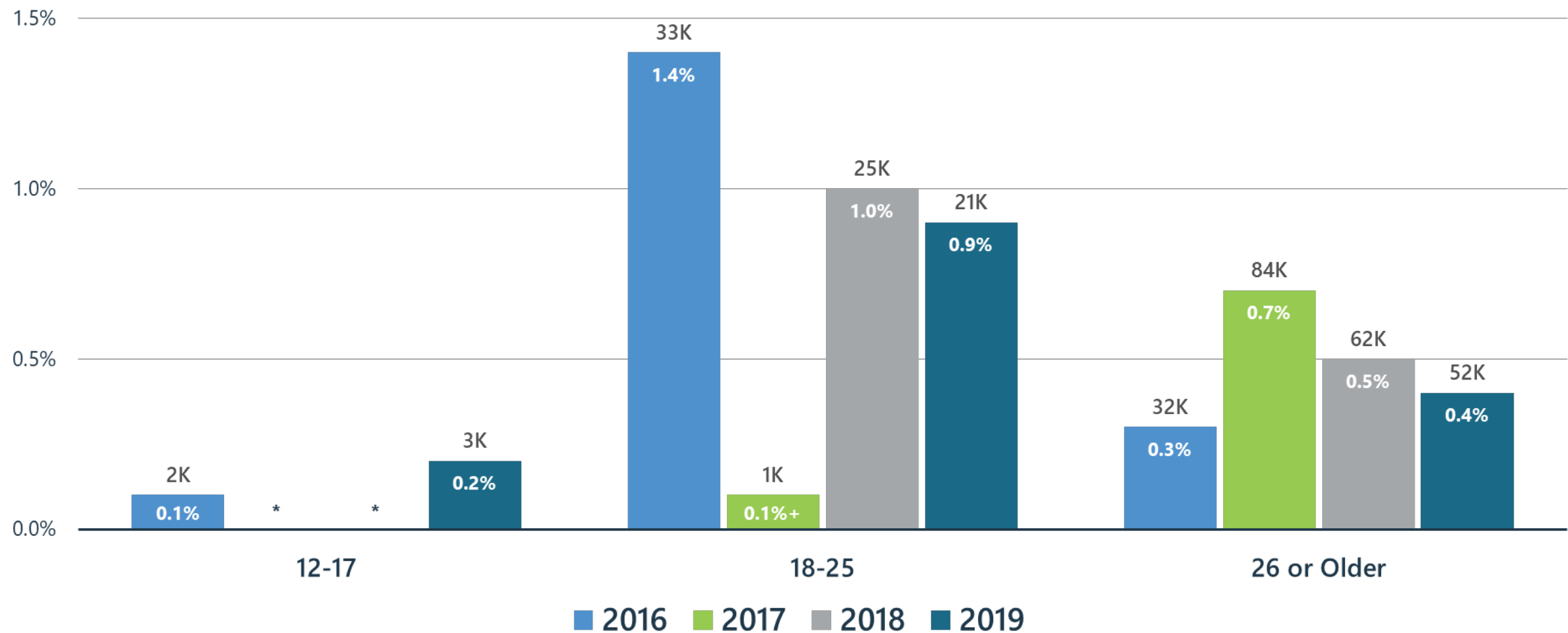
No differences between prior year estimates and the 2019 estimates are statistically significant at the .05 level.

# Marijuana Use: Health Concerns

- Past month marijuana use has remained stable for all age groups among Asian/NHOPIs.
- Marijuana use disorder has significantly increased since 2017 for the Asian/NHOPI population ages 26 and older.
- Past month marijuana use for non-pregnant Asian/NHOPI women ages 15-44 has significantly increased since 2016.

# Cocaine Use among Asian/NHOPIs

PAST MONTH, 2016-2019 NSDUH, Asian/NHOPI 12+

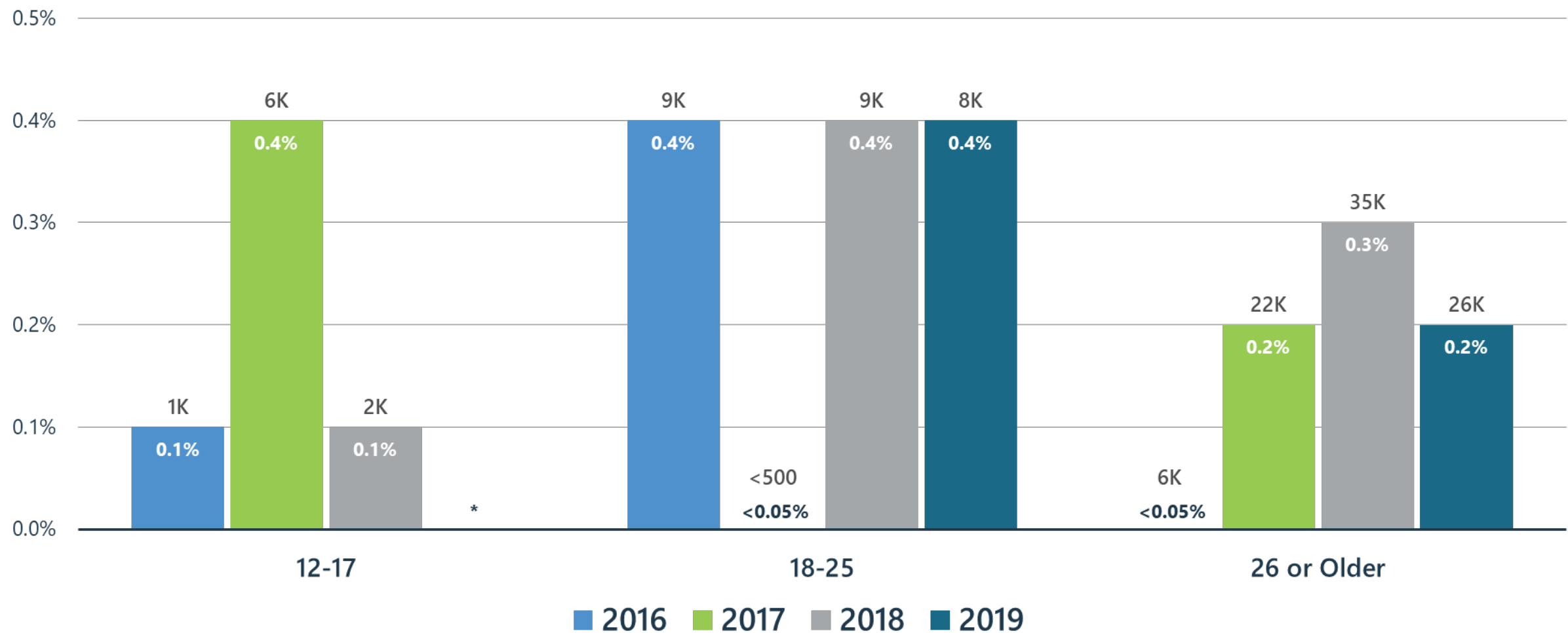


\* Estimate not shown due to low precision.

+ Difference between this estimate and the 2019 estimate is statistically significant at the .05 level.

# Methamphetamine Use among Asian/NHOPIs

PAST YEAR, 2016-2019 NSDUH, Asian/NHOPI 12+

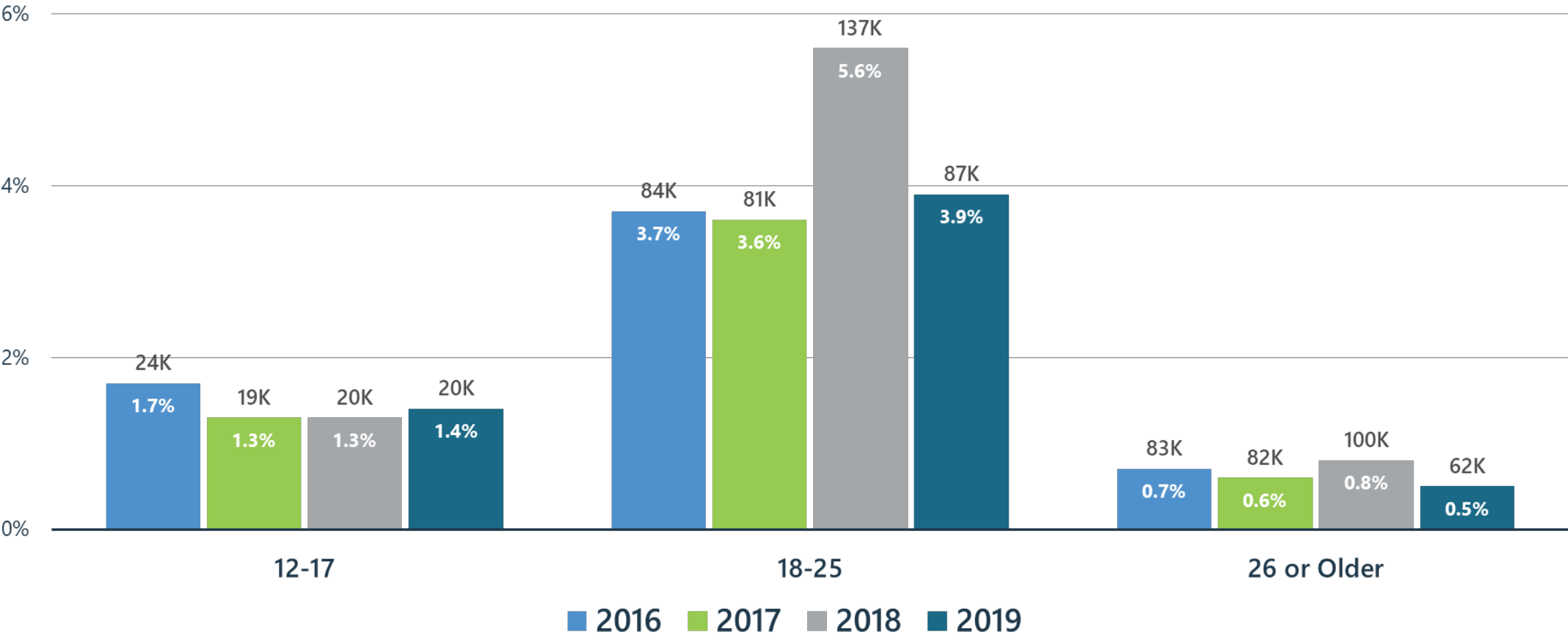


\* Estimate not shown due to low precision.

No differences between prior year estimates and the 2019 estimates are statistically significant at the .05 level.

# Misuse of Prescription Stimulants among Asian/NHOPIs

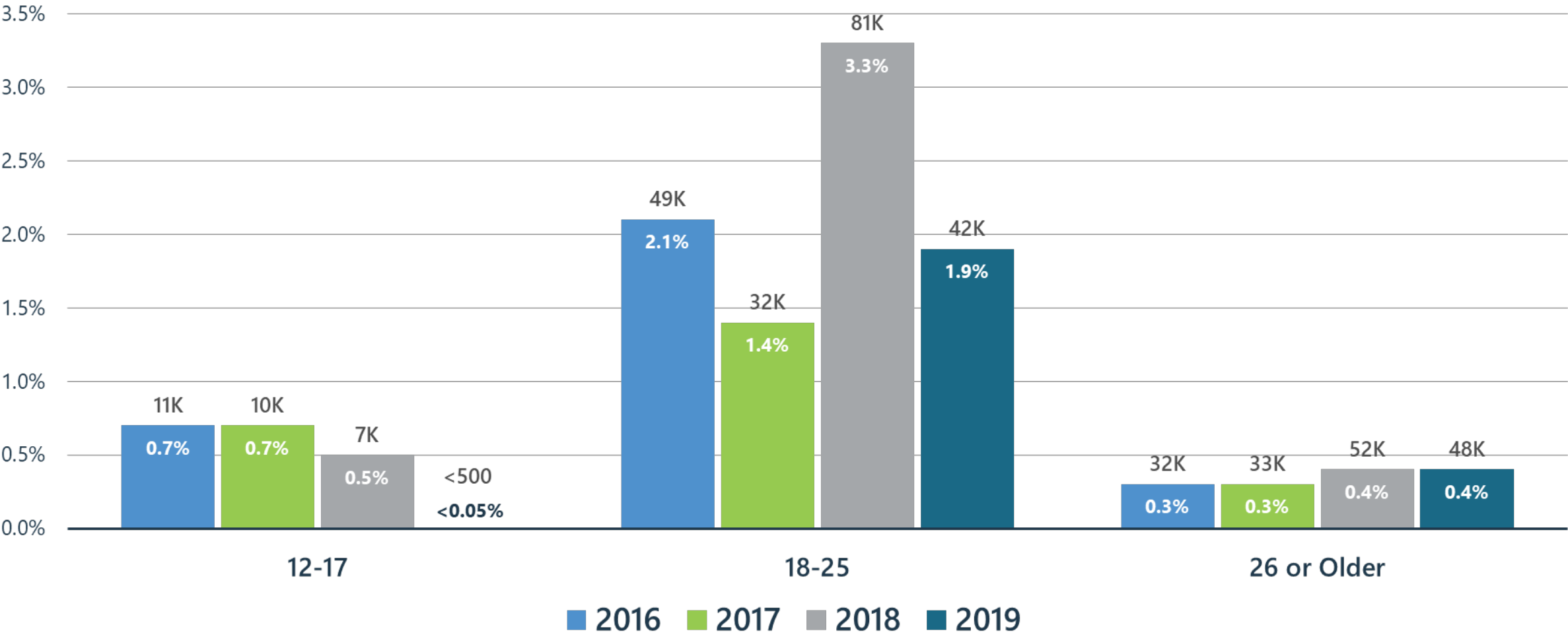
PAST YEAR, 2016-2019 NSDUH, Asian/NHOPI 12+



No differences between prior year estimates and the 2019 estimates are statistically significant at the .05 level.

# LSD Use among Asian/NHOPIs for All Age Groups

PAST YEAR, 2016-2019 NSDUH, Asian/NHOPI 12+



Estimates represent past year use of LSD (lysergic acid diethylamide), a type of hallucinogen.

No differences between prior year estimates and the 2019 estimates are statistically significant at the .05 level.

## Summary: Other Substance Use in the United States in 2019

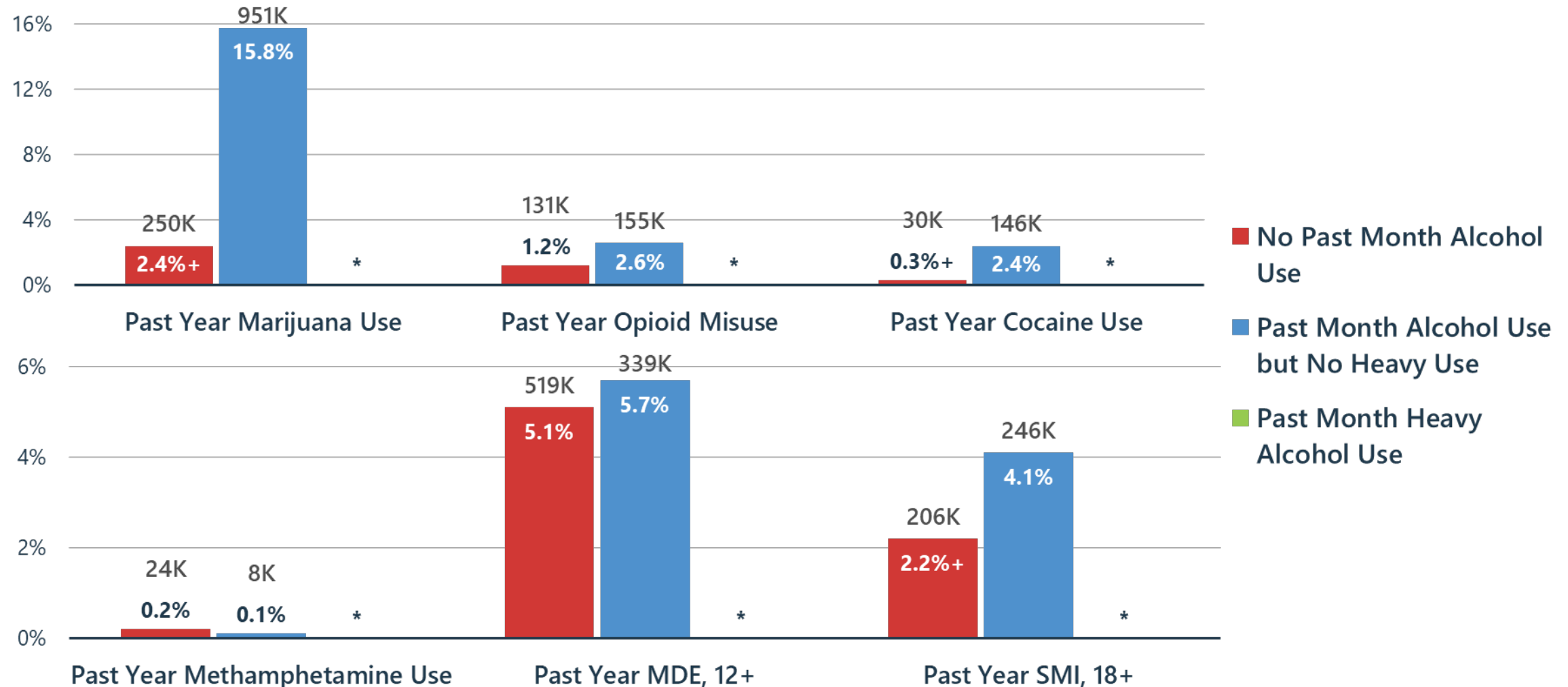
- Cocaine use among the Asian/NHOPIs population has significantly increased in ages 18-25 since 2017.
- Methamphetamine use and prescription stimulant misuse among Asian/NHOPI populations has remained stable.
- LSD use among Asian/NHOPI adults ages 18-25 has slightly declined since 2018.

# Polysubstance Use and Mental Illness



# Alcohol Use Related to Other Substance Use, MDE and SMI among Asian/NHOPIs

PAST YEAR/MONTH, 2019 NSDUH, Asian/NHOPI 12+

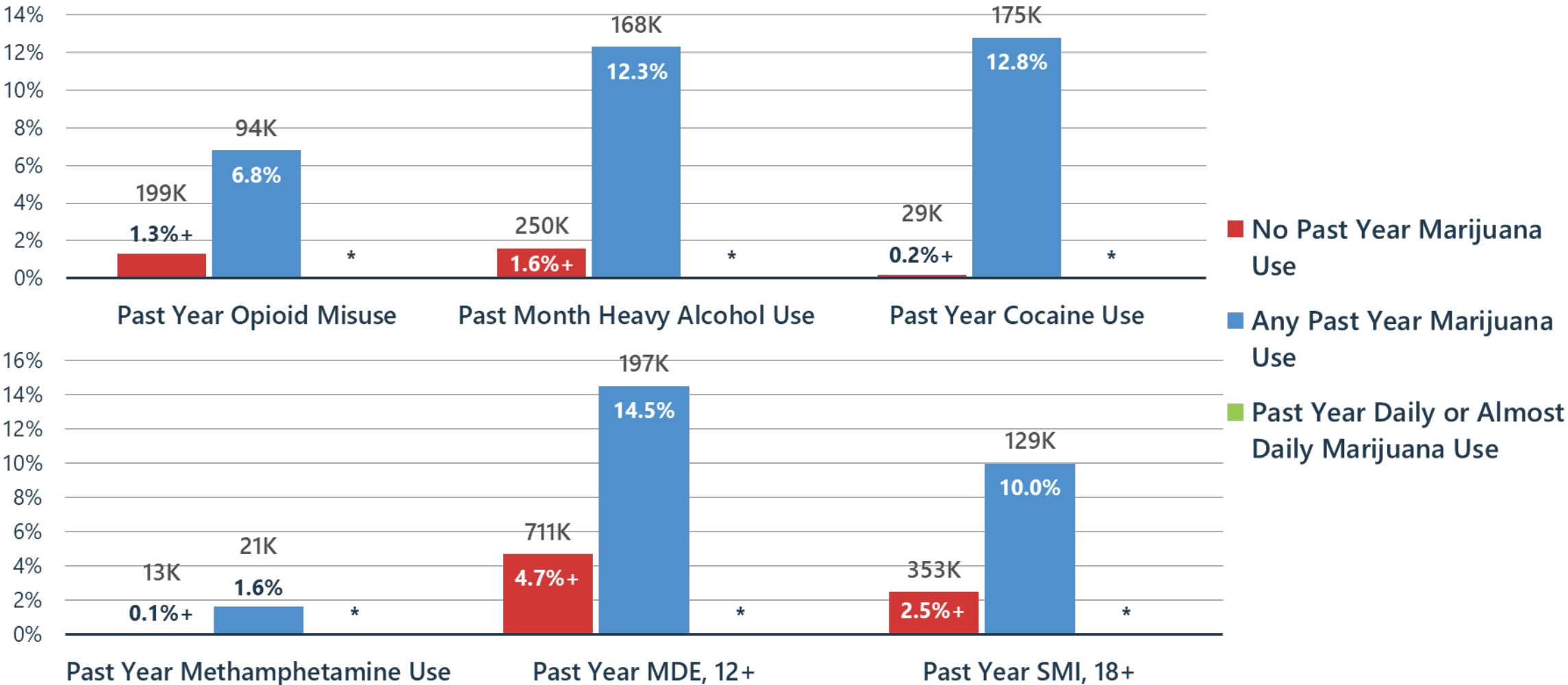


\* Estimate not shown due to low precision.

+ Difference between this estimate and the estimate for people with past month use but not heavy alcohol use is statistically significant at the .05 level.

# Marijuana Use Related to Other Substance Use, MDE and SMI among Asian/NHOPIs

PAST YEAR/MONTH, 2019 NSDUH, Asian/NHOPI 12+



\* Estimate not shown due to low precision.

+ Difference between this estimate and the estimate for people with past year marijuana use is statistically significant at the .05 level.

## Comparison of Rates of Mental/Substance Use Disorders Associated with Marijuana Use among Asian/NHOPIs: National vs. Colorado Data from the National Survey on Drug Use and Health (2019)

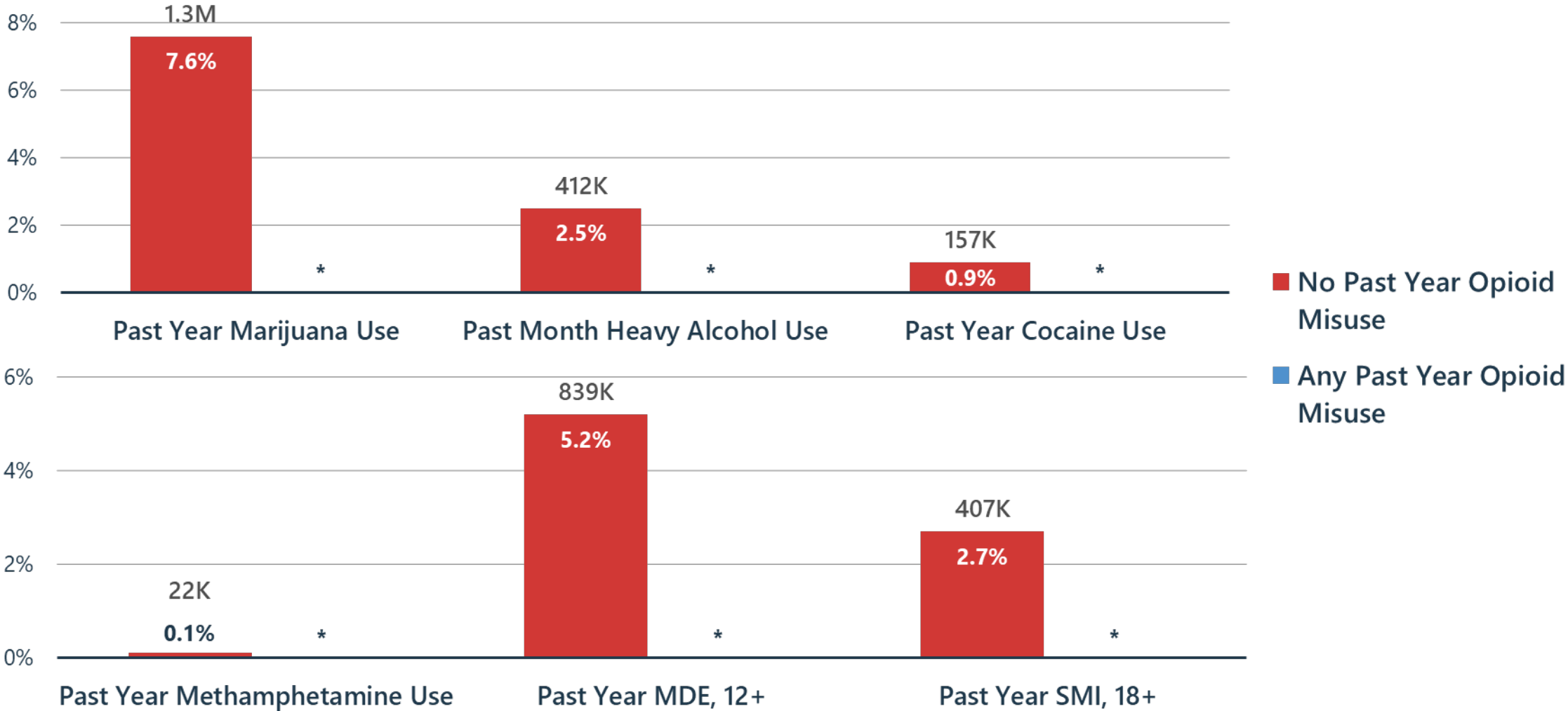
	National (%)	Colorado (%)	National vs. Colorado P-value
Past Month Marijuana Use (18-25 y)	12.4	*	*
Past Year Daily Marijuana Use (18-25y)	2.1	*	*
Past Month Marijuana Use ( $\geq$ 26y)	3.8	*	*
Substance Use Disorder (SUD) (18+)	4.8	*	*
Co-occurring SUD and SMI (18+)	0.9	*	*

\* Estimate not shown due to low precision.

Estimates for Colorado are direct single-year estimates for 2019 and will differ from model-based estimates using data from 2018 and 2019.

# Opioid Misuse Related to Other Substance Use, MDE and SMI among Asian/NHOPIs

PAST YEAR/MONTH, 2019 NSDUH, Asian/NHOPI 12+

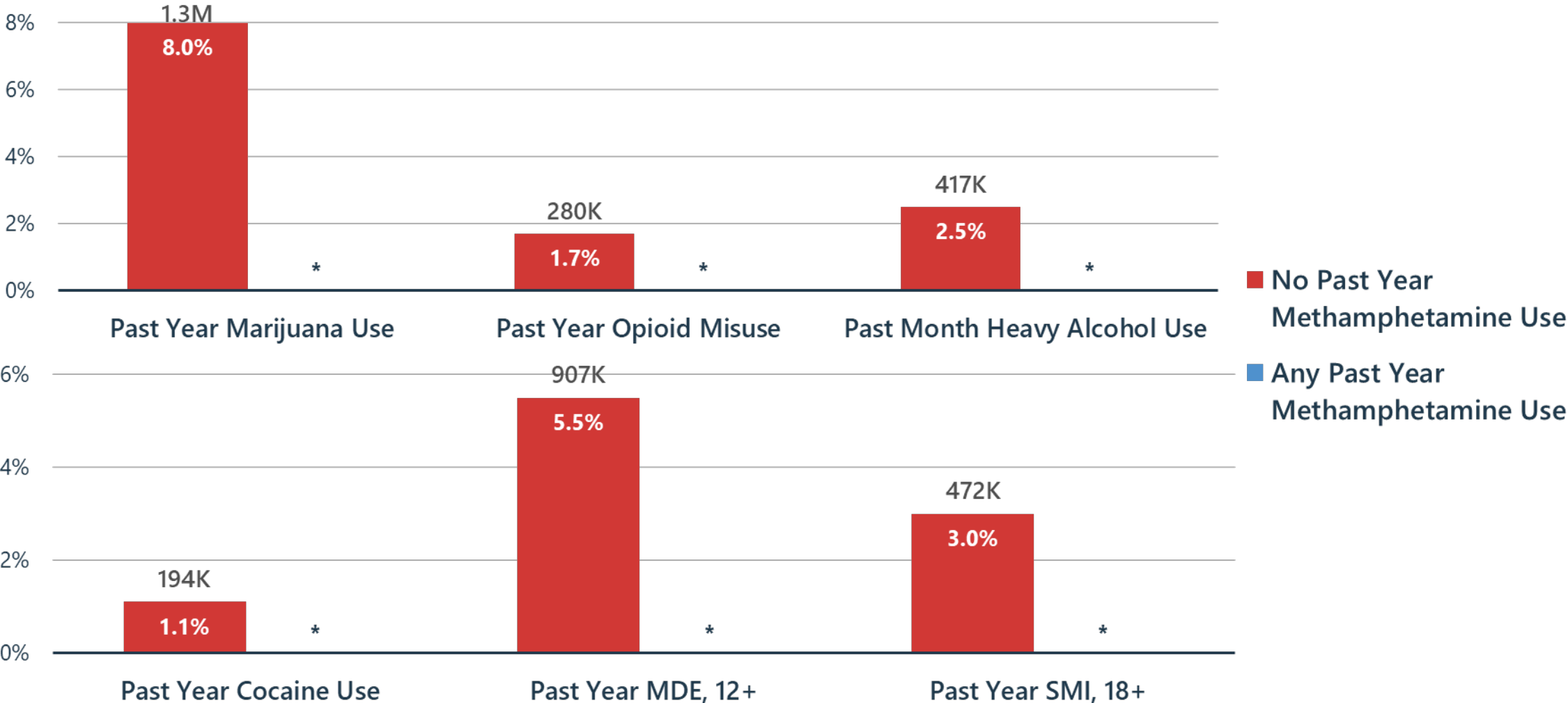


\* Estimate not shown due to low precision.

No differences between estimates for people with no past year misuse and the estimates for people with past year misuse are statistically significant at the .05 level.

# Methamphetamine Use Related to Other Substance Use, MDE and SMI among Asian/NHOPIs

PAST YEAR/MONTH, 2019 NSDUH, Asian/NHOPI 12+



\* Estimate not shown due to low precision.

No differences between estimates for people with no past year use and the estimates for people with past year use are statistically significant at the .05 level.

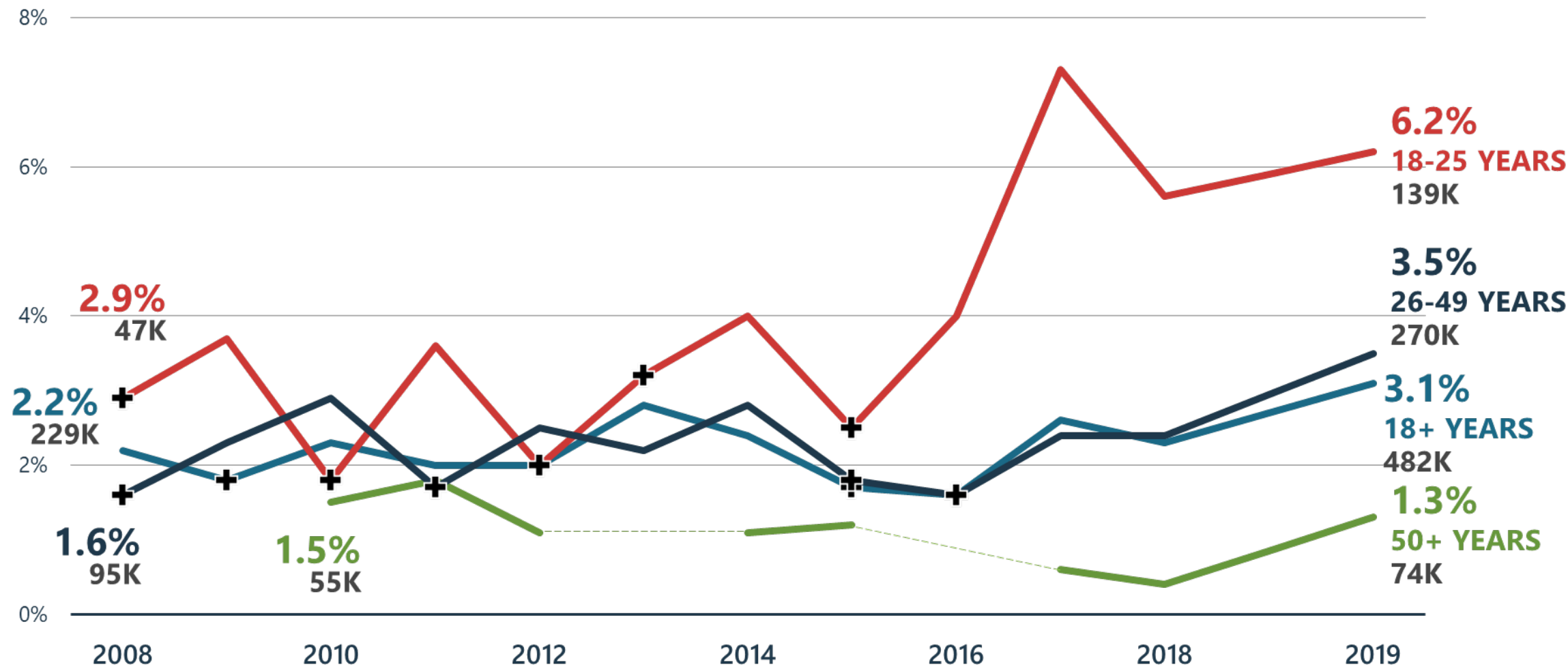
# Summary

- Polysubstance use is common—if a person is having problems with one substance, they are likely using and may be having problems with other substances
- Treatment providers must screen for and treat all substance use disorders and problem substance use
- Association of substance misuse and mental illness is clear—we must all do a better job of helping Americans understand these relationships and risks

# Mental Health

# Serious Mental Illness (SMI) among Asian/NHOPI

PAST YEAR, 2008-2019 NSDUH, Asian/NHOPI 18+



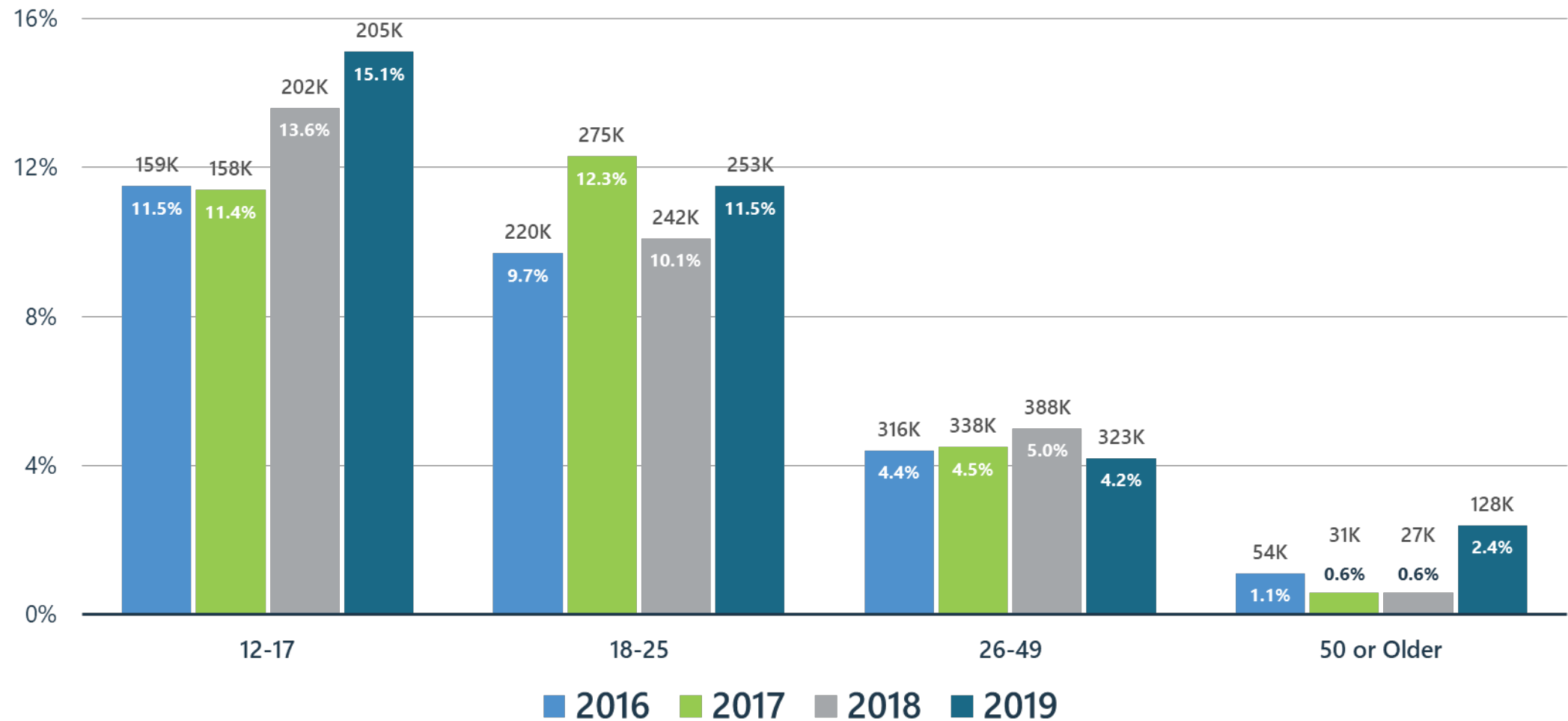
Estimates are not shown for certain years due to suppression.

+ Difference between this estimate and the 2019 estimate is statistically significant at the .05 level.



# Major Depressive Episodes among Asian/NHOPIs

PAST YEAR, 2016-2019 NSDUH, Asian/NHOPI 12+



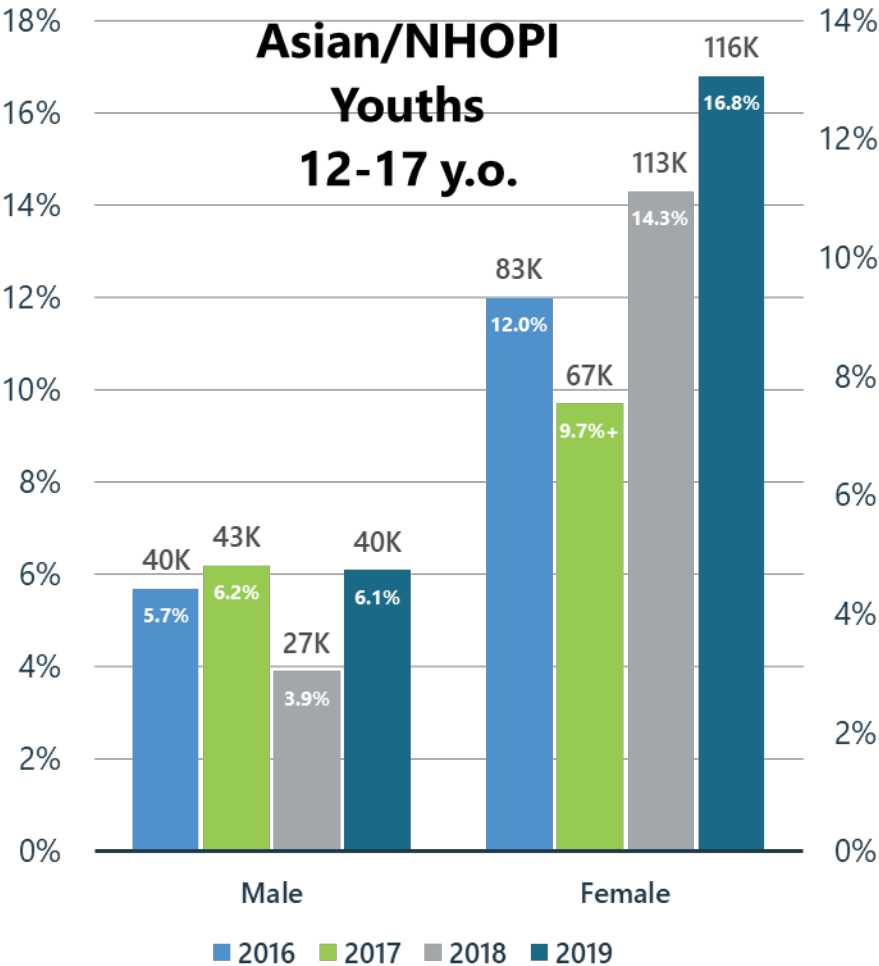
Note: The adult and youth MDE estimates are not directly comparable.

No differences between prior year estimates and the 2019 estimates are statistically significant at the .05 level.

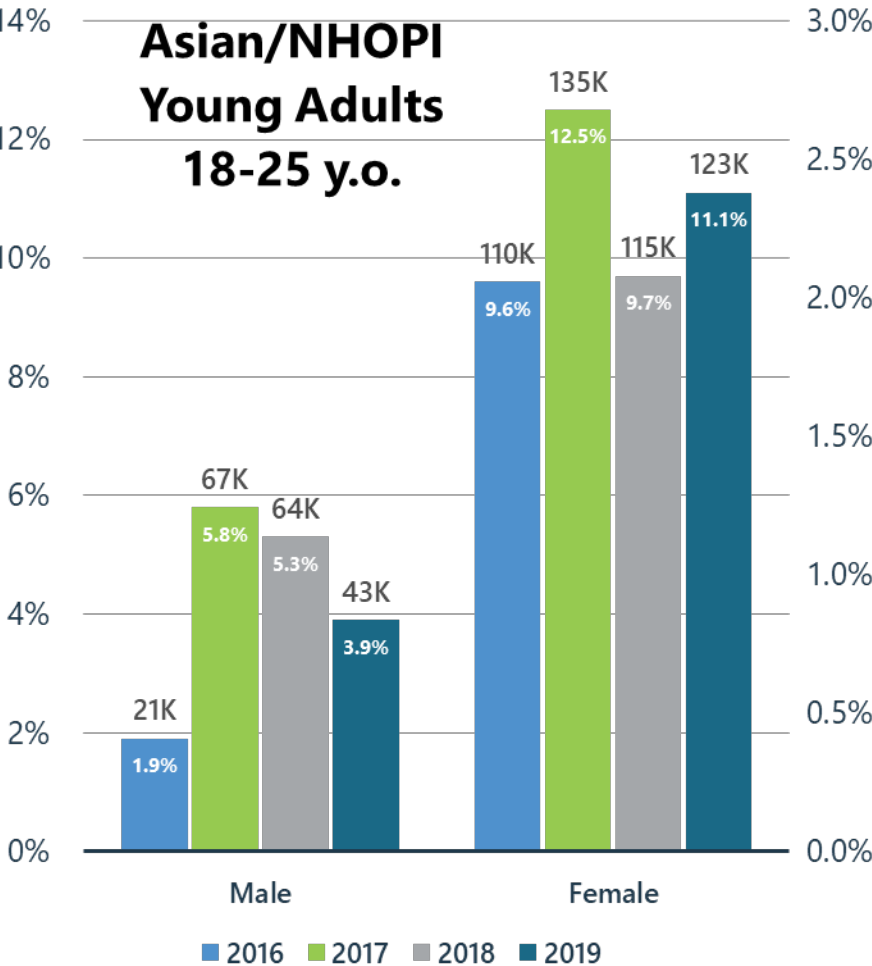
# Major Depressive Episodes with Severe Impairment among Asian/NHOPIs

PAST YEAR, 2016-2019 NSDUH, Asian/NHOPI 12+

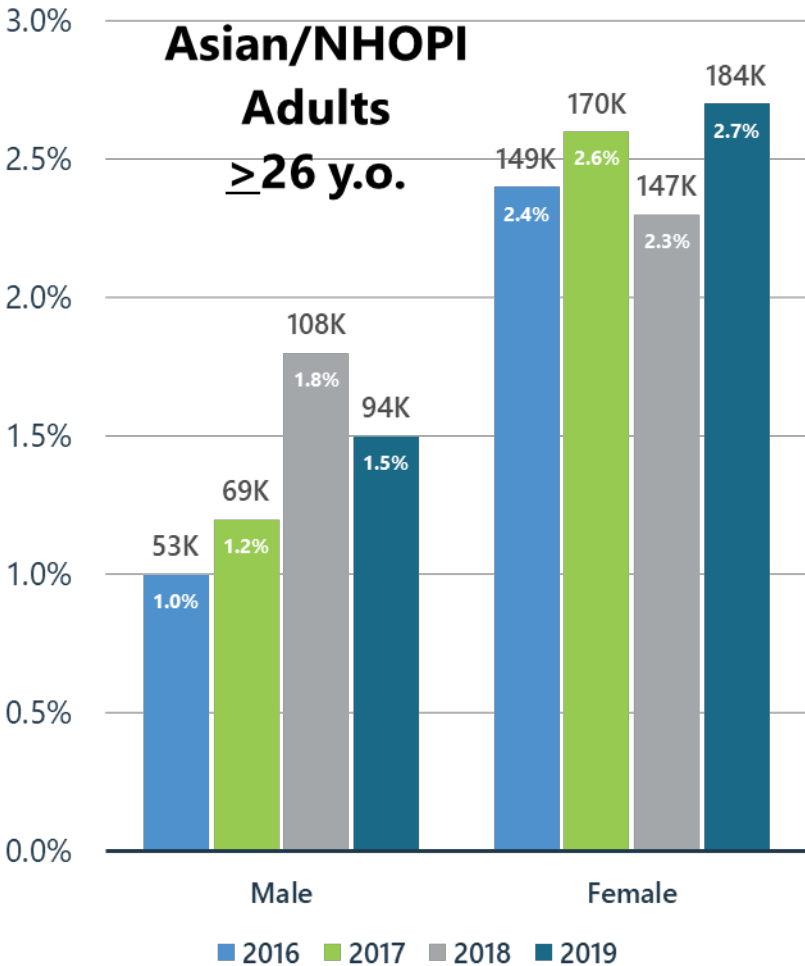
**Asian/NHOPI  
Youths  
12-17 y.o.**



**Asian/NHOPI  
Young Adults  
18-25 y.o.**



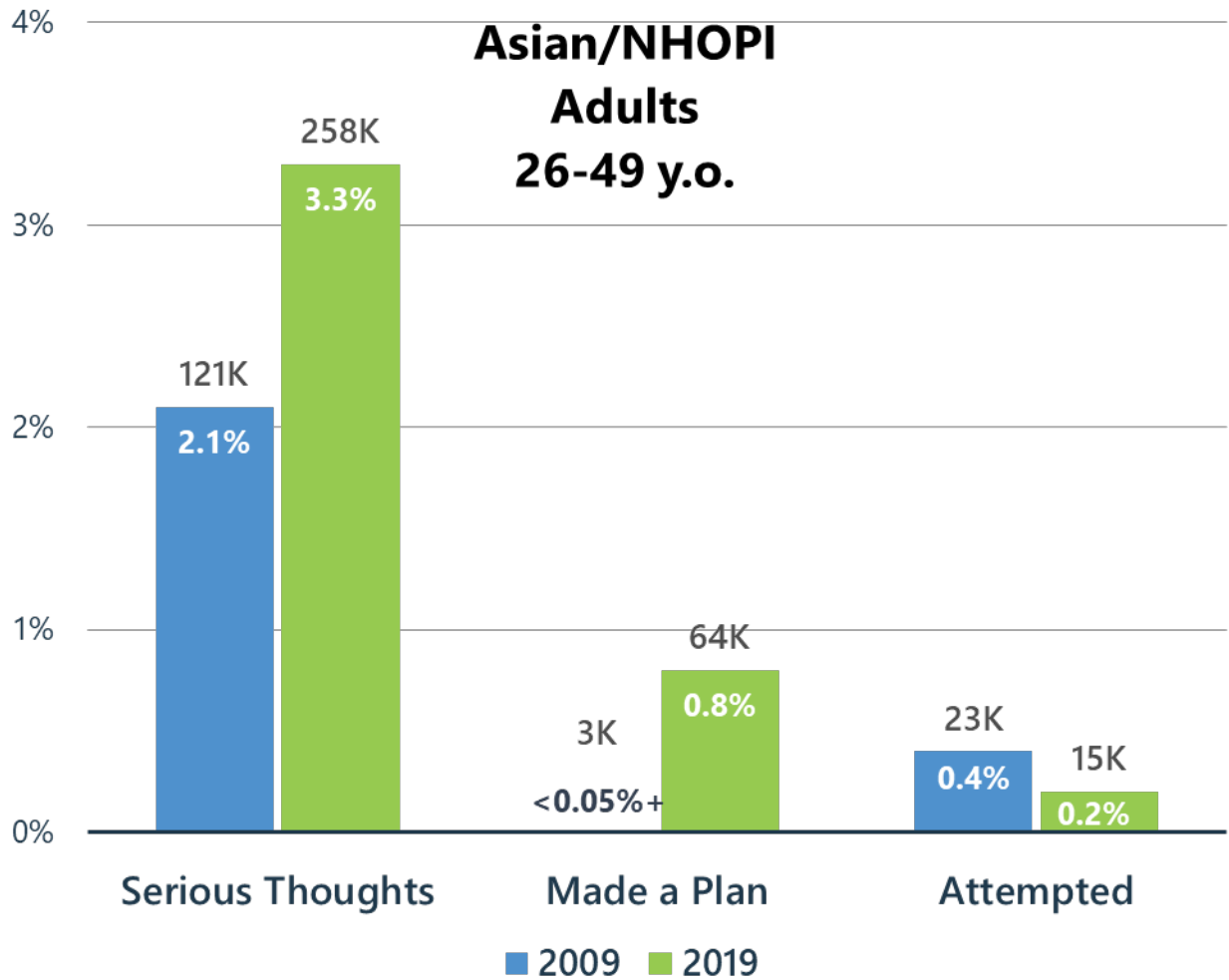
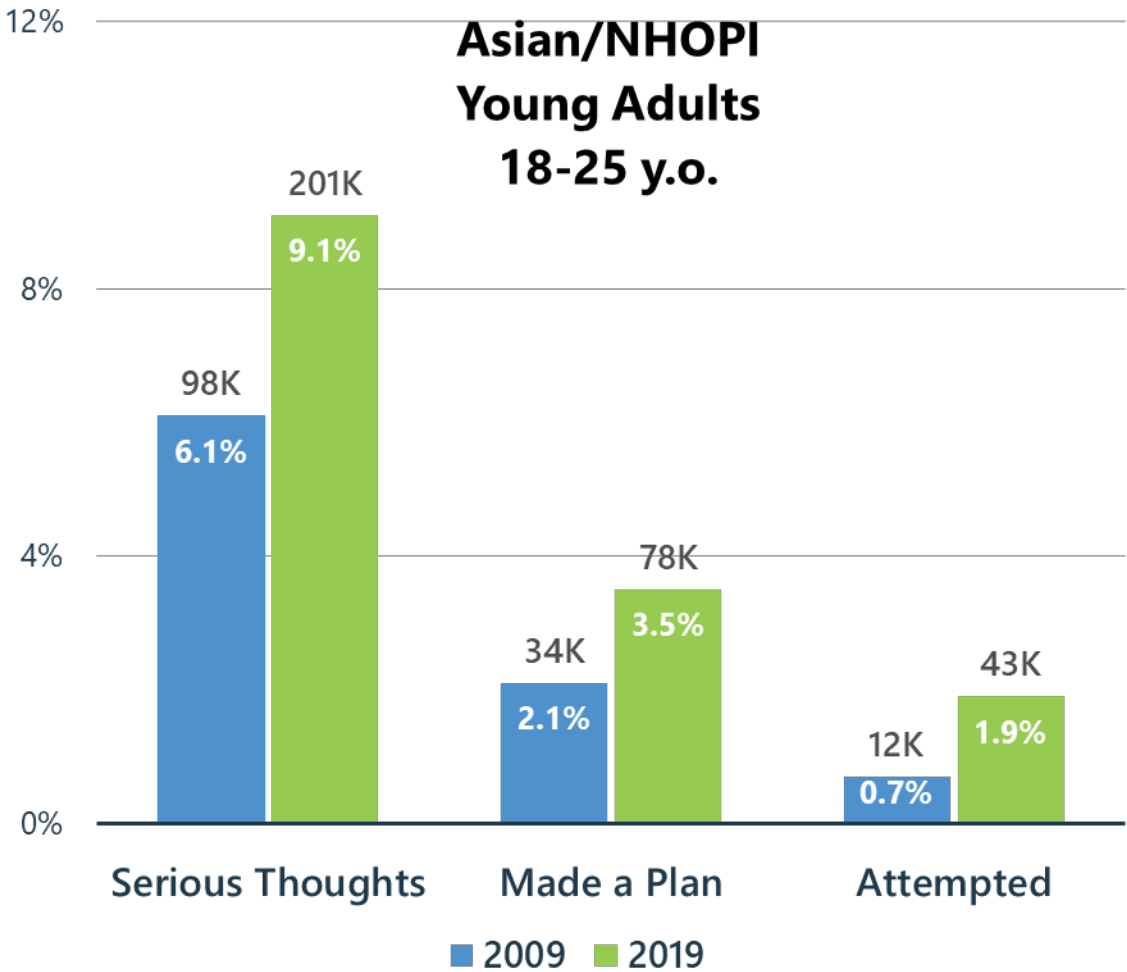
**Asian/NHOPI  
Adults  
≥26 y.o.**



+ Difference between this estimate and the 2019 estimate is statistically significant at the .05 level.

# Suicidal Thoughts, Plans, and Attempts Increase for Asian/NHOPI Young Adults (18-25 y.o.) and Asian/NHOPI Adults (26-49 y.o.)

PAST YEAR, 2009 and 2019 NSDUH, Asian/NHOPI 18-49

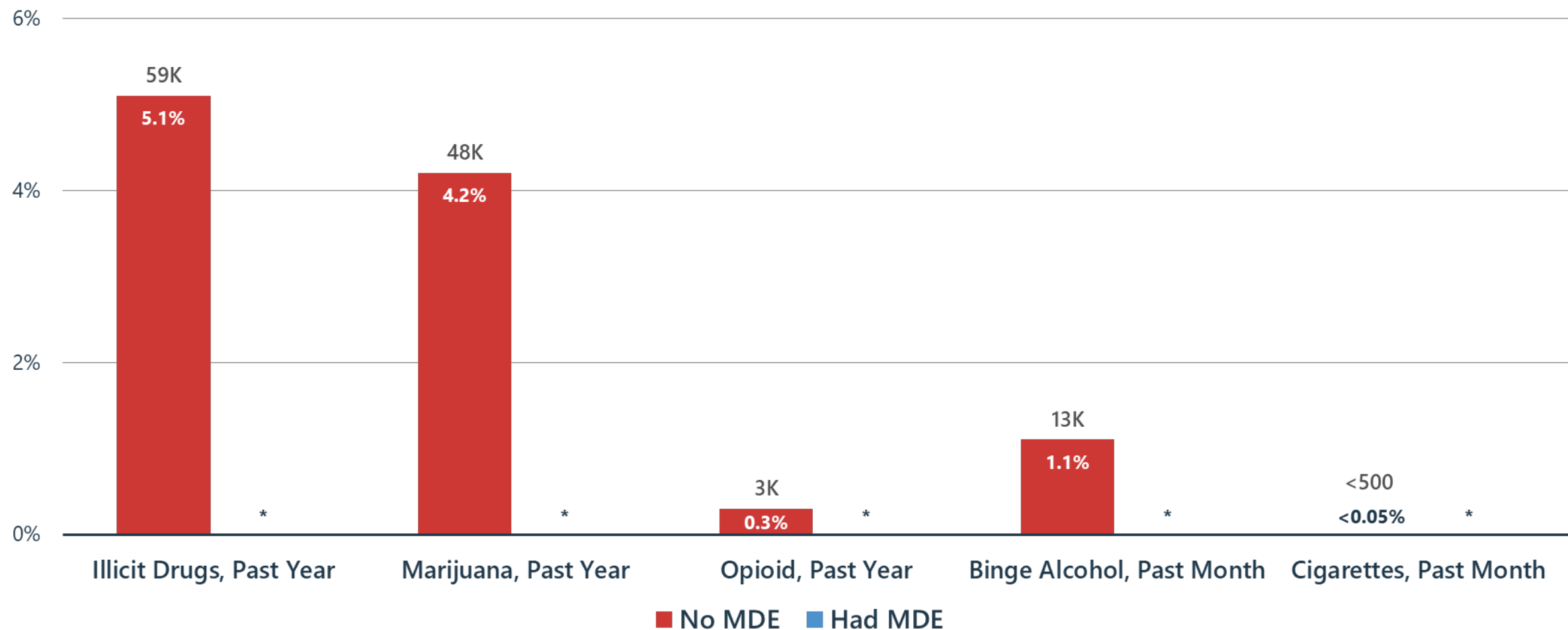


+ Difference between this estimate and the 2019 estimate is statistically significant at the .05 level.

# Co-Occurring Mental and Substance Use Disorders

# Substance Use among Asian/NHOPI Youths (12-17 y.o.) by Past Year Major Depressive Episode (MDE) status

PAST YEAR/MONTH, 2019 NSDUH, Asian/NHOPI 12-17

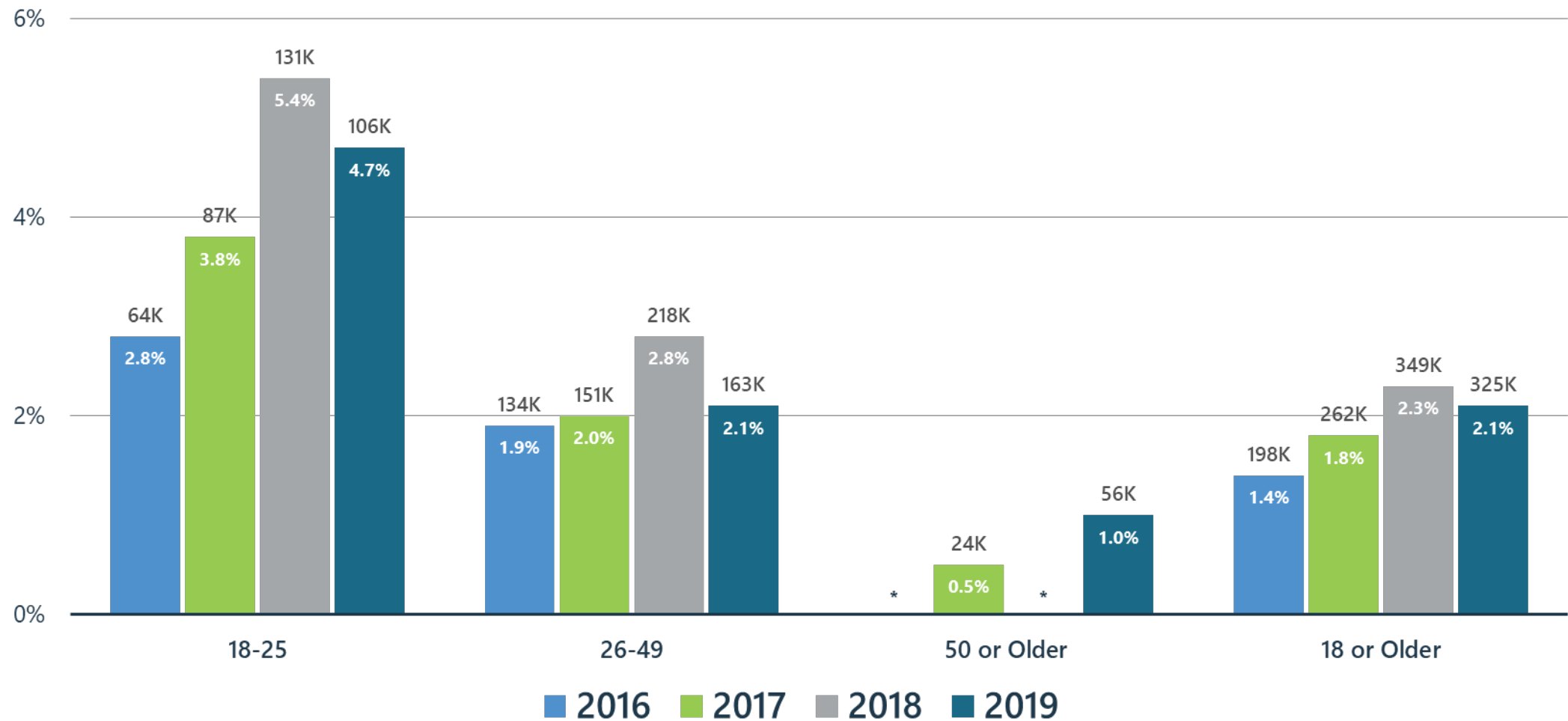


\* Estimate not shown due to low precision.

No differences between estimates for youths without MDE and estimates for youths with MDE are statistically significant at the .05 level.

# Co-Occurring Substance Use Disorder and Any Mental Illness in Asian/NHOPI Adults

PAST YEAR 2016-2019, Asian/NHOPI 18+

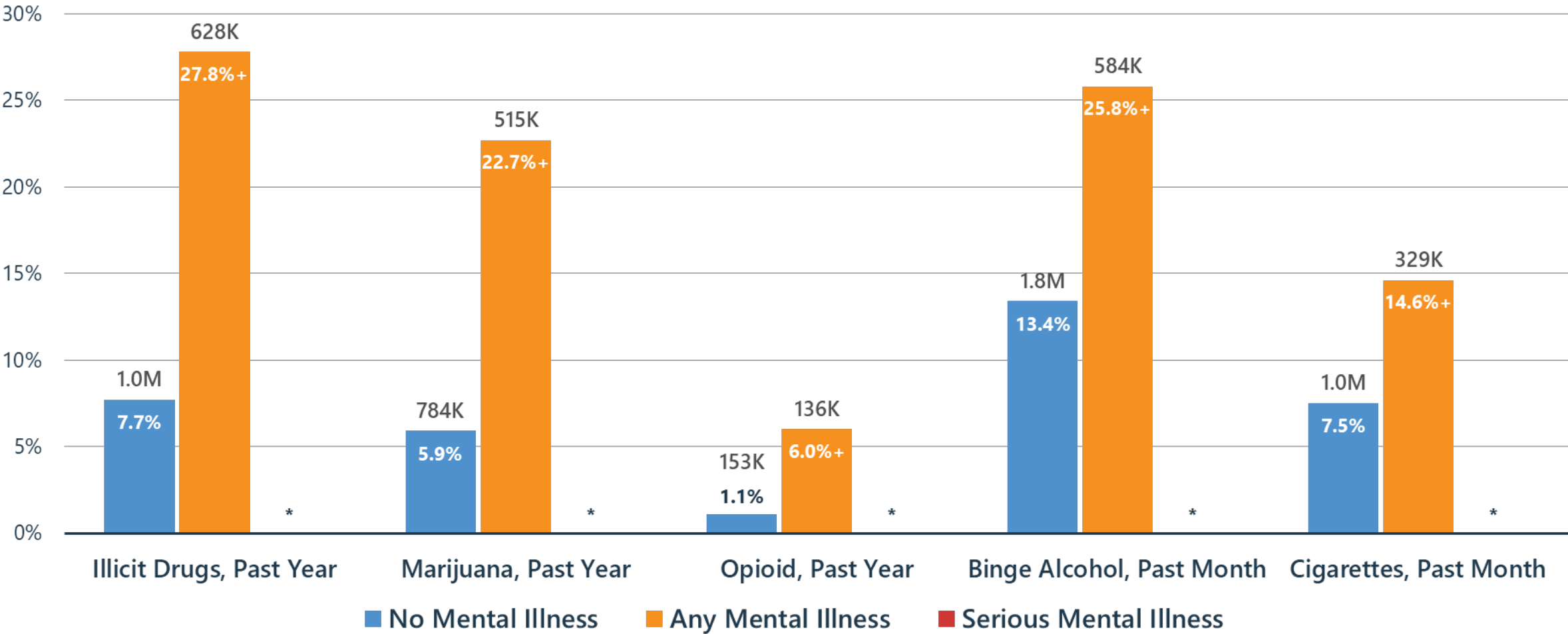


\* Estimate not shown due to low precision.

No differences between prior year estimates and the 2019 estimates are statistically significant at the .05 level.

# Co-Occurring Issues: Substance Use and Mental Illness among Asian/NHOPI Adults

PAST YEAR/MONTH, 2019 NSDUH, Asian/NHOPI 18+

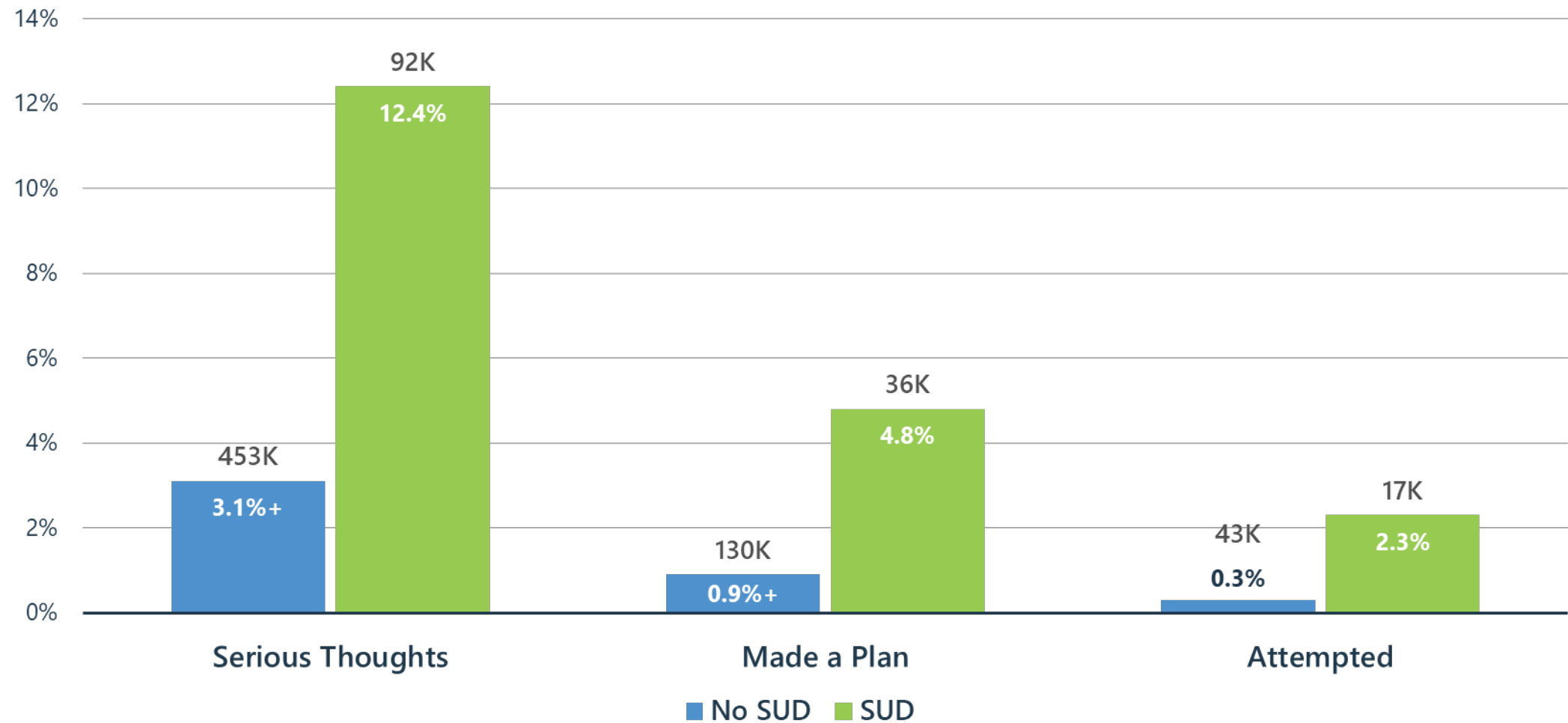


\* Estimate not shown due to low precision.

+ Difference between this estimate and the estimate for adults without mental illness is statistically significant at the .05 level.

# Substance Use Disorder (SUD) is Associated with Suicidal Thoughts, Plans, and Attempts among Asian/NHOPI Adults ≥18 y.o.

PAST YEAR, 2019 NSDUH, Asian/NHOPI 18+

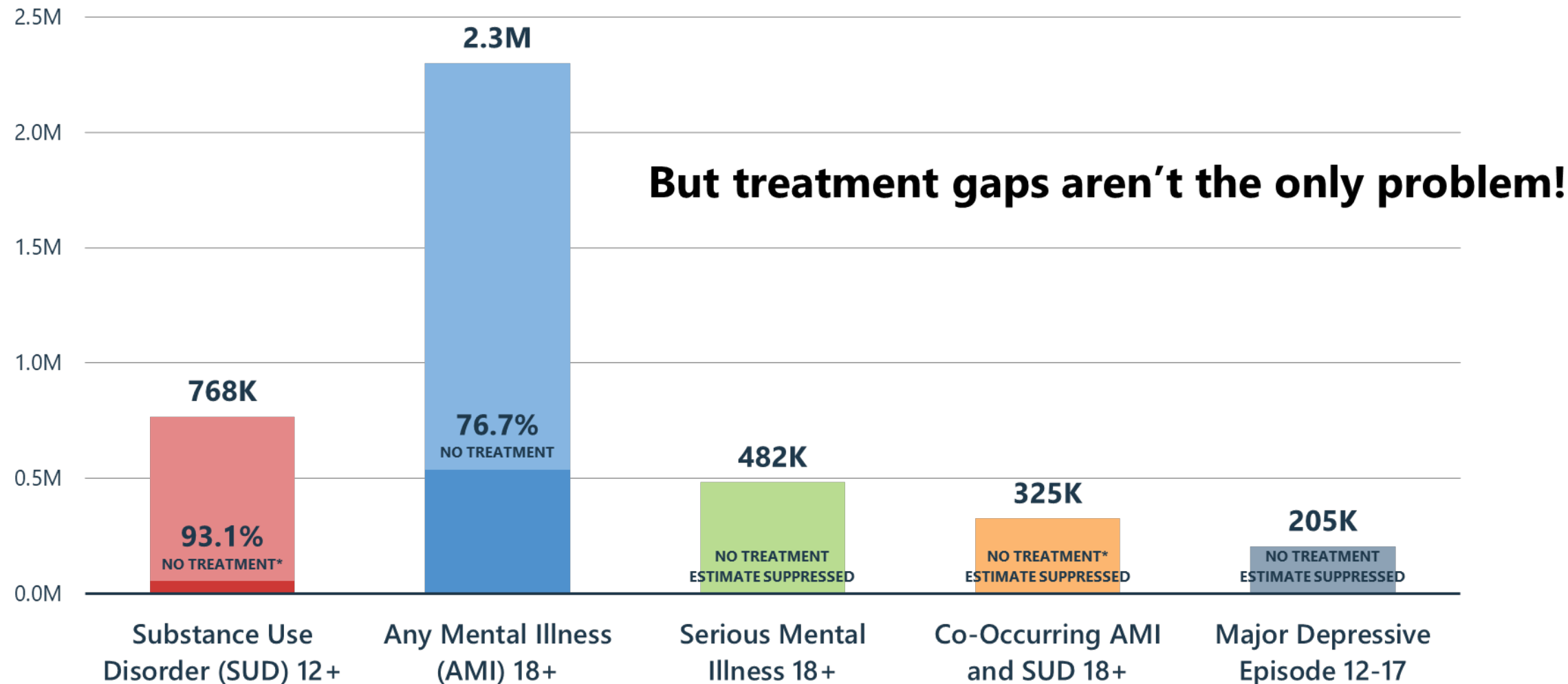


+ Difference between this estimate and the estimate for adults with SUD is statistically significant at the .05 level.



# Mental and Substance Use Disorders among Asian/NHOPIs: High Prevalence/Huge Treatment Gaps

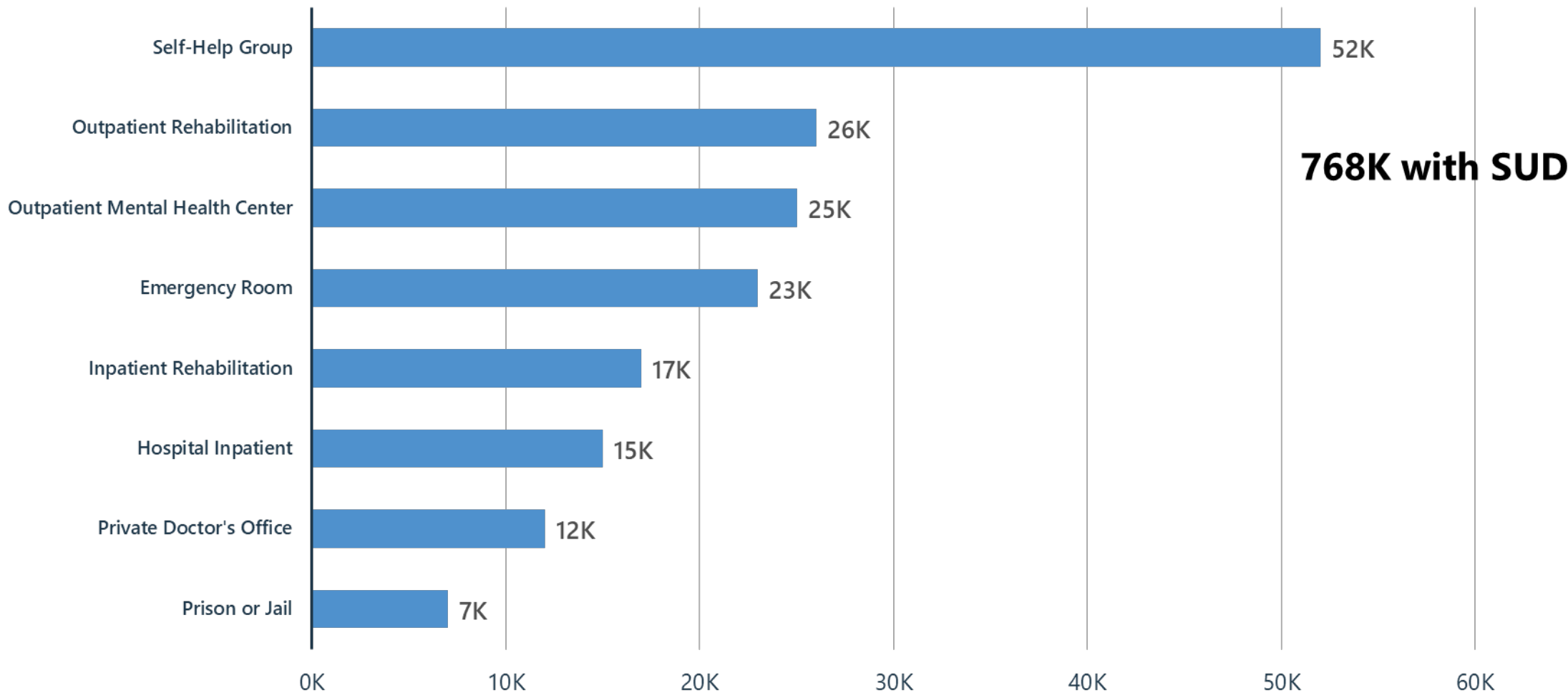
PAST YEAR, 2019 NSDUH, Asian/NHOPI 12+



\* No Treatment for SUD is defined as not receiving treatment at any location, such as a hospital (inpatient), rehabilitation facility (inpatient or outpatient), mental health center, emergency room, private doctor's office, self-help group, or prison/jail.

# Locations Where Substance Use Treatment was Received among Asian/NHOPIs

PAST YEAR, 2019 NSDUH, Asian/NHOPI 12+



Locations where people received substance use treatment are not mutually exclusive because respondents could report that they received treatment in more than one location in the past year.

# Summary: Mental Health/Co-Occurring Issues in the United States in 2019

- Since 2009, the number of Asian/NHOPI adults ages 26-49 who made a suicide plan has significantly increased.
- Substance use disorder significantly increased suicidality among Asian/NHOPI adults ages 18 and older.
- There were significant increases in past year substance use for Asian/NHOPI adults ages 18 and older with any mental illness.
- Self-help groups ranked higher than outpatient rehabilitation facilities for the locations where substance use treatment was received.

# What Can We Do Now?

- SAMHSA must use its resources to benefit as many as possible:
- Community based treatment and recovery services
- Build on the Certified Community Behavioral Health Clinic model
  - Crisis intervention services/suicide prevention resources
  - Integrated mental health, substance use, general medical services
  - Children's mental health services-linkages with schools
- Keep telemedicine/telehealth in place including use of telephone where audio/visual is not possible and pay for these services at same rate as face-to-face—no reduction in reimbursement because it is telemedicine
- Continue and expand as possible technical assistance and training to behavioral health providers—clinicians and peers

# It's Up to Us Now

- Let's work as hard as we can to make decision-makers understand mental health and substance use needs in America—pre and post-COVID-19
- Let's keep the virus in mind in planning and implementing our services so that we can safely deliver care, but we cannot ignore the overall health needs of the American people—that is not an option
- Let's work to meet the mental health/substance use needs of our people:
  - Restore our systems—mental health and substance use disorder services are 'essential services'
  - Expand our treatment and community recovery support systems permanently
  - Every American life is precious and every American death—regardless of the cause is a terrible loss